

NAME _____ TYPE OF BIKE _____ # ON BIKE _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ (2015 Season)

E-MAIL _____ PHONE# _____ CELL # _____

MAKE OF VEHICLE _____ MODEL _____ Color _____ YEAR _____ LICENSE PLATE # _____

LIST ANY FAMILY MEMBERS (PLEASE PRINT)

NAME _____ TYPE OF BIKE _____ NUMBER ON BIKE _____

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PLEASE PHOTO COPY OF CURRENT HEALTH INSURANCE CARD (BELOW)

I will comply with the clubs 94dB to 96dB exhaust muffler sound rule

PLEASE MAIL BACK WITH CHECK OR MONEY ORDER TO:

HILLSIDE RIDING CLUB

P.O. BOX 9336

ERIE, PA. 16505

YEARLY MEMBERSHIP ...UNBELIEVABLY ONLY \$200.00 PER YEAR

RELEASE & WAIVER OF LIABILITY AND INDEMNITY AGREEMENT: I, the undersigned, do hereby for myself, my heirs, executors, and assigns release, remise, & forever discharge & agree to indemnify & hold harmless the Hillside MX Club and it's board of directors plus land owners of any claim, demand, action, or right of action of whatsoever kind of nature and any cost, loss, or expense in connection with riding or being involved in any event on the clubs leased land. Including any claims or demands for injury or death of any persons or any damage or destruction of any property resulting from or claimed to result form or arise out of accident or occurrence during the clubs operational times. I will receive a copy of hillside riding club's by-laws; I will review & comply with the information presented to me.

Yearly memberships start on February 15th 2015 & end February 15th 2016

SIGNATURE _____