



Castle Country Off Highway Vehicle Association



Membership

2019

Name (s) _____

(Please print ALL names in the household that will be riding)

Address _____ P.O. Box _____

City _____ State _____ Zip _____

Phone Number _____ E-Mail Address _____

NEW MEMBER ___ **RENEWAL** ___ **Receive Newsletter by E-Mail – Y** ___ **N** ___

Membership will cost \$ 25.00 per year per household. This money will be used for newsletter, postage, club events and group membership to The BLUE RIBBON COALITION & The Utah ATV Association.

STATEMENT OF LIMITED LIABILITY

The Castle Country Off Highway Vehicle Association assumes no responsibility or liability for any loss, damage, or injury or death to any person or property in connection with your participation in any ATV ride. Your presence and participation in rides indicates knowledge of, and assumption of, the resulting risks involved. All participants are, therefore, urged to be sure that they use proper riding gear, are in satisfactory physical condition, and to secure prior to the ride, appropriate medical and personal injury and property damage insurance coverage. A parent or legal guardian must accompany juveniles. Utah State law requires that operators of ATV's must be 8 years of age or older. Operators between 8 and 16 years of age must be State certified in order to ride on Public lands.

No Alcohol Policy on all Club Sponsored Events and Runs. "Drinking Alcohol while driving an ATV is against the Law" Each Member is expected to portray a safe and responsible attitude while riding ATV's and to respect the environment around us.

I HAVE READ THE ABOVE INFORMATION ON RISK, RELEASE AND WAIVER OF LIABILITY, HOLD-HARMLESS AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I MAY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT, ON BEHALF OF MYSELF AND MY MINOR CHILDREN, FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND FULLY INTEND MY SIGNATURE TO BE A COMPLETE, CONTINUING AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE FULLEST EXTENT ALLOWED BY LAW. IF I FAIL TO ABIDE BY THE ASSOCIATION BY-LAWS, I SHALL FORFEIT MY MEMBERSHIP AND DUES.

Signature

Date

Signature

Date

WOULD YOU LIKE TO HELP?

_____ Lead a club ride.

Suggest a place to ride: _____

_____ Help with club events.

Suggest a club event: _____

_____ Become a Board Member

Nominate a Member: _____

**If mailed, send to:
CCOHVA
P.O. Box 1747
Price, UT 84501**