

## OUT-OF-TOWN MEMBERSHIP ENROLLMENT 2020

If mailing application, send to: Last Chance Riders Association, Inc. P.O. Box 711 Helena, Montana 59624

Active:Single (\$150 + 20hrs)Family (\$225 + 40hrs)  Non-Active:Single (\$300 + 0hrs)Family (\$450 + 0hrs) (Check One)					Check One)	
NAME: (PRINT)						
MAILING ADDRESS: _	(LAST)		(FIRST)		(MI)	
CITY:	STATE:	_ ZIP:	E-MAIL	. <del>.</del>		
TELEPHONE:	NE: ALTERNATE:					
EMERGENCY CONTACT:			PHONE:			
MEMBERS BIKE NUMBER: DISTANCE FROM HELENA:						
Family Member(s) Na	me			Bike Number	Age	
	MEMBERSHIP	AGREEME	NT AND SIGNA	TURE		
In accordance with any conditions noted herein, the undersigned acknowledges and agrees to the following:						
The use of any Last Chance Riders Association, Incorporated (hereinafter referred to as the "Club") property is a privilege of Club Members and the Club owes the undersigned, his/her responsible persons (hereinafter referred to as "Family") and/or chaperoned guests (hereinafter referred to as "Guests") no duty of care with respect to the condition of Club properties available to members except through an act or omission that constitutes willful or wanton conduct in the name of the Club.						
The undersigned recognizes and present or engaging in activities of properties. The undersigned agree and/or Guests. The undersigned By-Laws, in their entirety.	on Club properties. The Club es to hold harmless and inc	expressly disclaid demnify the Club for	ms any warranties of sa or any injury or damage	fety for the intended use, to his/her personal prope	purpose of Club erty, self, Family	
I understand that my active memb family. Initial:	pership agreement requires	me to work at lea	st 20 hours per year if I	chose single or 40 hours	a year if I chose	
I understand that I may only bring so may result in the loss of my me			e arrangements beforeh	and with the proper pape	erwork. Failure to do	
By signing this document you may from risks inherent in the sport or are the result of the Club's failure	recreational opportunity or	for any injuries or				
THE UNDERSIGNED CER THE CONDITIONS DESCI IS, TO THE BEST OF HIS	RIBED IN THIS FORM	1 AND THAT T	HE INFORMATION	N PROVIDED BY HI		
SIGNATURE:	under 18 years of age: Par	ont or Lorel Corre	dian)	DATE:		
(IT	unuer 18 years of age: Par	eni or Legai Guar	uiaii)			