

**Amwell Valley Trail Association**  
**Membership Renewal/Invoice**

The AVTA membership year runs from January to December. ID Tags will be issued to the people listed on this application. (**No loaning of tags is permitted.**) You may have an occasional guest ride with you, but they are NOT covered by the AVTA insurance, and they may not ride or hike without an AVTA member. You can renew your membership by PayPal or by sending a check.

by PayPal	by Check
Visit <a href="http://www.AVTA.net">www.AVTA.net</a> , click "JOIN US". Enter your name, membership dues amount and click Pay with PayPal. Send this signed renewal form to <a href="mailto:renewal.avta@gmail.com">renewal.avta@gmail.com</a> .	Complete and sign your renewal form and send it with a check payable to A.V.T.A to A.V.T.A. , P O Box 696 , Ringoes, NJ 08551

Please correct any of the information below (circle changes) and sign

**For trail maintenance do you have:**

Gas Chainsaw    Gas Weed Trimmer    Tractor with mower    Riding mower

1) Name:  
Address:

2) Phone Number: E-Mail: Best contact method?:

3) East Amwell Township Landowner: AVHPC Pony Club Member:

4) Hiker: Rider: Number of horses used for trail riding:  
4a) Description horse(s) height - ##H ##Inches / breed / gender / color and markings: (continue on back if needed)

5) Where they are stabled:

6) Family Members to be included on application:

7) Emergency Contact:

8) Current selection for active participation requirement is:  
If change is desired, check one:  

Be on the Board of Governor's Committee	Newsletter
Clearing and marking trails	Establish new trails
Work on fundraising projects	Attend Planning Board /Township meetings
Other - (specify) _____	

9) Current membership is for:  
If change is desired, check one: (For family membership, please include the names of each included family member)

(IHL) Individual Hiker	\$20	(IRL) Individual Rider - Landowner	\$25
(FHL) Family Hikers	\$25	(FRL) Family Riders - Landowners	\$35
Donation to Charles Foster Weeden III		(IRB) Individual Rider - Boarder	\$35
Memorial Scholarship Fund	\$	(FRB) Family Riders – Boarders	\$45

10) I hereby indicate that I have read and agree on behalf of myself, and other members of my family for whom this application is made, to abide by the rules and regulations of the Amwell Valley Trail Association. I understand that any infractions thereof, by myself, family members, or guests, may be grounds for membership termination. Further, I understand that horseback riding and hiking are an assumed risk activity and hereby release from any and all liability the members, officers, Board of Governors, landowners and agencies holding properties through which there are trails.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_