

**MEMBERSHIP APPLICATION  
and RELEASE FORM**

*Lewis Clark ATV Club, Inc.  
PO Box 2021, Lewiston ID 83501*

Name: \_\_\_\_\_ /Spouse/Partner: \_\_\_\_\_

Address: \_\_\_\_\_ /Children(under 18): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Home Phone#:( ) \_\_\_\_\_ Cell #: ( ) \_\_\_\_\_

Membership Type: \_\_\_\_\_ Family (\$20) \_\_\_\_\_ Individual (\$15)

Sponsoring Member: \_\_\_\_\_

**In consideration of the acceptance of my membership -**

**I/we hereby give up all my rights to sue or make any claim whatsoever against Lewis Clark ATV Club, In., it's officers, members, and agents, land owners, all governmental agencies, their commissioners, agents, and employees, conducting or connected with any club activity or event; for any injury, death or property damage I may suffer, whether such injury arises while I am preparing or participating or while upon the events or activity premises and all other areas, not limited to the route, or other areas pertinent to where any activity relate to the event shall take place. The agreement applies to the participants for property damage, injury including death to my person, in any way in connection with club events or activities. I HEREBY EXPRESSLY ACKNOWLEDGE AND AGREE that the activities of the event are very DANGEROUS and involve the risk of serious bodily injury and /or death and also property damage.**

**This RELEASE, WAIVE OF LIABILITY AND INDEMNITY AGREEMENT COVENANT NOT TO SUE, applies to myself, my personal representative, heirs, and next of kin. I HEREBY ASSUME FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE. My signature below acknowledges that I fully understand the risk if I am allowed to participate or observer.**

\_\_\_\_\_  
Signature

I have read and agree to this release

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse/Partner Signature

I have read and agree to this release

\_\_\_\_\_  
Date