

Snow Pioneers Membership Form

Name of Applicant		DOB:
Spouse		DOB:
Children		DOB:
Address		
City, State, Zip		# of Registered Sleds
Home Phone		
Cell Phone		
Email Address		

Membership Fees \$25.00	Mail Application to:
Makes Check Payable to: Snow Pioneers	Snow Pioneers 1582 210th St Manchester, IA 52057

In consideration of your accepting this application, I hereby for myself, my heirs, executor, and administration, and/or the minors for whom I am signing, release and forever discharge the sponsor, co-sponsor and agents, servants, other club members, land owners or managers of land I may be using or owners of any equipment I may use of and from any and all loss, damage or injury by me or my equipment.

I agree to abide by the By-laws of this club. I understand that state law requires that I carry liability insurance for any and all vehicle operated by myself and/or the minors for whom I am signing, on any and all public or private trails.

I have read and understand the above and I hereby affirm that these statements are true.

Signature _____ Date _____