

Tri-County ATV Recreation and Rescue Membership Application

Membership Season April 1st —March 31st 2027

MEMBERSHIP \$1000.00*

Includes 1 Quad Tag (additional tags are \$5 each)

Includes 1 Vehicle Tag (additional Tags are \$5 each)

*memberships may include husband, wife and children under the age of 18 living in the same household.

Primary Member Information

First Name:		Last Name:	
Address:			
City:		State:	
		Zip Code:	
Phone Number:		Email Address:	
Driver License Number:		Drivers License State:	

Family Member Information

Spouses Name:			
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	
Dependant Name:		Dependant Date of Birth:	

Emergency Contact Information

First Name:		Last Name:	
Address:			
City:		State:	
		Zip Code:	
Phone Number:			

Tri-County ATV Recreation and Rescue Membership Application

TOW Vehicle Information

Year:		Make:		Model:		Color:	
Plate Number:			State:				

ATV Information

Make:		Model:		DCNR Plate Number:	
Make:		Model:		DCNR Plate Number:	
Make:		Model:		DCNR Plate Number:	
Make:		Model:		DCNR Plate Number:	
Make:		Model:		DCNR Plate Number:	
Make:		Model:		DCNR Plate Number:	

Waiver Information

I, the undersigned, do hereby acknowledge receipt of a copy of, and agree to abide by, all Tri-County ATV Recreation & Rescue Association rules and regulation, I also acknowledge the risk of injury to my person or property and to others while riding, patrolling, practicing or competing on all Tri-County ATV Recreation & Rescue Association authorized property. I know and understand that off road riding is an extremely dangerous sport and I will rely on my own judgment and ability and assume all risk of injury or damage while on Tri-County ATV Recreation & Rescue authorized property. I will not file suit against Tri-County ATV Recreation & Rescue Association, its officers, its members or the landowner. I understand this membership is valid from April 1st of the current calendar year through March 31st of the following year (NO EXCEPTIONS).

Primary Member Signature:		Date:	
Spouses Signature:		Date:	

Additional Information

Time/Talent: Please list any professions, talents, business, etc. That you would like to share with us.

<p>Make all Checks Payable to: Tri-County ATV Recreation and Rescue Association, Inc., P.O. Box 29, Heilwood, PA 15745</p> <p>For additional information—Please Call: 1-877-WE12ATV (931-2288)</p>
--