

Ausable River Riders Club (A.R.R.C.) Registration Form

First Name: _____ **(Print with block letters)**

Last Name: _____ **Contact Phone #:** (____)-_____

Family Members Names who will be riding machine or machines. Waiver required.

Mailing Address: _____

E-Mail Address: _____

Emergency Contact Person: _____ **Phone #:** (____)-_____

Insurance Information: (Company Bike/ATV's insured with, the pink slip.)
Company: _____ **Phone #:** (____)-_____

Motor vehicle liability insurance Policy Number: _____

ATV/Motor Cycle Information, Fee's:

Machine	ATV or MC	Make/Model	License Plate #	Office Use Only	
				ARRC Permit #	Amount \$
1					
2					
3					
4					
5					
				Work days fee	, add \$50.00
				Day/Weekend Pass Credit(s), Attach Permit(s)	
				Cash __ Cheque # _____ Total:	\$

Permit Fee: \$125.00 + \$50.00 = \$175.00

Work Day Dues: \$50 included above can be earned back by attending a work day and signing the attendance sheet. \$25 each day. Max \$50 total.

This is the responsibility of the member. See website for dates.

Additional Machines: \$50.00 per additional bike/ATV. Example: Spouse, children, grandparents or anyone living at the same address.

Signature: _____ **Date:** _____

Parked Vehicle Make: _____ **License Plate #** _____

Check list: member(s) under 18 waiver signed by parent or guardian _____,
 ABCA/ARRC waiver signed _____, Executive Name _____