

PROUD LAKE TRAIL RIDERS ASSOCIATION & KENSINGTON TRAIL RIDERS

Joint Membership Application Year: _____

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Please indicate (X) Membership option:

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| <p>Dues for Joint Membership in Proud Lake Trail Riders Association and Kensington Trail Riders</p> <p>___ Single - \$25.00</p> <p>___ Family - \$35.00</p> |
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Please make checks payable to: Proud Lake Trail Riders Association

Please mail payment and application to: PLTRA Memberships
3210 Red Fox Lane
Milford, MI 48381

Under the Michigan Equine Activity Liability Act, 1994 PA 351, an equine professional is not liable for an injury to or the death of a participant in an equine activity resulting from an inherent risk of the equine activity.

I hereby release Proud Lake Trail Riders Association (PLTRA) and, if this a joint membership, Kensington Trail Riders (KTR), their members and officers, of all and any liabilities for personal loss/injury and/or property loss/damage of any kind in connection with any activities sponsored or organized by PLTRA and, if this is a joint membership, KTR. I accept all responsibility for myself, family members, and personal property. I agree to participate in these activities aware of the potential risks involved. Parent or Legal Guardian signature required for children under 18 years of age.

Signature: _____ Date: _____

Signature: _____ Date: _____