

(Membership Runs from January 1st to December 31st)

TUG HILL ADIRONDACK ATV ASSOCIATION
P.O.Box 773 Lowville, NY 13367
2024 ASSOCIATE MEMBERSHIP



Membership # _____ Single

Membership # _____ Family

Mail Check or Money Order To: Tug Hill / Adirondack ATV Assoc.

Web: <http://tughilladirondacksatv.com>

Single membership \$10.00 APPLICATION INFORMATION Family Membership \$10.00

Renewal **New Member** Circle Single or Family Membership

*Name: _____ Phone: _____

*Address: _____ *E-Mail: _____

*City: _____ *State: _____ *Zip: _____

FAMILY MEMBERSHIP INFORMATION

Spouse Name: _____ Phone: _____

PLEASE READ

In exchange for participating in the activities and events of the "Association" and, also in exchange for being permitted to operate off highway recreational vehicles ("ORVs") upon designated trails and areas located on property of landowners whose permission has been obtained by the Tug Hill Adirondack ATV Association, for one year from the date of this application and waiver. I understand and agree as follows
Acknowledgement and Assumption of Risk: I understand and acknowledge the risk of accident or injury to my person or property and to others while riding ORVs. I accept and assume all risks and dangers and all responsibility for any such accident or injury no matter how, or by whom, it may be caused.

Release, Waiver, Hold-Harmless and Indemnity: To the fullest extent permissible by law, I hereby release, waive, discharge and covenant not to sue the Tug Hill Adirondack ATV Association, it's Officers, Delegates or the landowners, from all liability, and further agree to indemnify and hold them harmless for accident or injury whether caused by the negligence of the Association, and the landowners, or otherwise
I HAVE READ THIS ASSUMPTION OF RISK, RELEASE AND WAIVER OF LIABILITY, HOLD-HARMLESS AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I MAY HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT, ON BEHALF OF MYSELF AND MY MINOR CHILDREN, FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE OR GUARANTEE BEING MADE TO ME AND FULLY INTEND MY SIGNATURE TO BE A COMPLETE, CONTINUING AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE FULLEST EXTENT ALLOWED BY LAW.

MEMBER CODE OF ETHICS

I recognize that people will judge all motorized trail users by my actions.
I will ride only on designated signed or mapped trails and areas.
I will slow down, use caution and be courteous when I encounter other trail users.
I will respect and preserve the public and private property that I ride on.
I will ensure my equipment meets New York State safety, insurance, registration, emission and.....
I will not endanger myself and other trail users by riding beyond my ability or while impaired by drugs or alcohol
I will not attempt to disturb or directly pursue wildlife with my recreational vehicle.
I will not construct jumps or obstacles anywhere on the trail or riding areas.
Club membership may be terminated at any time by a vote of the club Board of Directors. Just cause for terminations includes but is not limited to failure to abide by club code of ethics.

Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

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PLEASE PRINT CLEARLY SO WE CAN READ YOUR INFORMATION.
Thank You