

**2010 Membership Form  
Tri-State Dirt Riders Association**

**Annual Membership: \$25.00**

Rider Name \_\_\_\_\_ Rider Date of Birth \_\_\_/\_\_\_/\_\_\_  
(Please print clearly)

Parent or legal guardian if member is a minor \_\_\_\_\_  
(Please print clearly)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Many updates and notices are sent on a regular basis via e-mail, if you would like to receive those e-mails please provide your email address:

Email Address \_\_\_\_\_  
(Please print clearly)

**Registration Information**

Bike Number	Class	Bike Make/Model
1 <sup>st</sup> Choice _____ 2 <sup>nd</sup> Choice _____		
1 <sup>st</sup> Choice _____ 2 <sup>nd</sup> Choice _____		
1 <sup>st</sup> Choice _____ 2 <sup>nd</sup> Choice _____		
1 <sup>st</sup> Choice _____ 2 <sup>nd</sup> Choice _____		

I/we agree to abide by all Tri-State Dirt Riders Association rules for the operation of the association or activities put on by them. I understand that if I do not follow the rules I could cause harm to property, myself, or to others. I understand that volunteerism is of vital importance to the ongoing viability of this sport and agree that I will help to the best of my ability.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Parent or legal guardian if member is a minor)

**Please make checks payable & send to:**

Tri-State Dirt Riders Association  
P.O. Box 415  
Scottsbluff, NE 69363