



# Capital Quad ATV Club Membership Application

|   |  |
|---|--|
| Surname   | First Name   |
| Home Address  | Postal Address<br>(If different from home)                               |
| Home Telephone No.  | Business Telephone No.   |
| Mobile Phone No.  | Fax No.  |
| E-mail Address  | Preference for receiving ride notifications<br>Mail      Fax      E-mail |
| Quad Make                      Model  | Year                      2 x 4 or 4 x 4                                 |
| Partners Name   | Quad   |
| Child's Name                      Age   | Quad   |
| Child's Name                      Age   | Quad   |
| Do you know an existing club member Yes/No  | Name   |
| <b>Next of kin for emergency contact</b><br>Name:<br>Relationship:  | Phone:<br>Mobile Phone:<br>Address:                                      |
| <b><i>By signing below, I agree to be bound by all Capital Quad ATV Club Inc rules. I also understand that ATV'ing is a dangerous sport that by signing below I agree that any land owner, the Capital Quad ATV Club Inc, or the organisers of an event can not be held liable or responsible for direct, indirect or consequential loss, injury, death or damage arising from any activity the Capital Quad ATV Club Inc organises, promotes or attends.</i></b> |  |
| Signed  | Date   |

Subs for the 2009/2010 financial year are \$40.00 full membership & \$45.00 family membership.  
Subs can be included with the application or you will be sent an account on your membership being approved.

**Capital Quad ATV Club Inc, P O Box 39028, Te Puni, Wellington Mail Centre**