



Sevier Valley OHV Club Membership Form

_____ Membership Year

First Name:			First Name:		
Last Name:			Last Name:		
Address:			Cell Phone:		
City:	State:	Zip:	Home Phone:		
Cell Phone:			E-Mail:		
Home Phone:			Emergency Contact:		
E-Mail:			Emergency Number:		
Make Check Payable to:	Sevier Valley OHV Club		Dues for Membership		
	P.O. Box 142		\$20.00/Single		
	Richfield, Utah 84701		\$30.00/Couple and Family members living under one roof		
Comments: _____					
<p>PLEASE READ CAREFULLY BEFORE SIGNING:</p> <p>I understand there are inherent dangers in riding ATV/UTV's and I agree to accept full responsibility for my personal safety and well being. I also understand and agree that I am solely responsible for my own medical, accident, property damage or other liabilities while participating in any Sevier Valley OHV Club sponsored activities, its officers, committees, sponsors, members, volunteers, land management agencies, guides and any other who helps organize our event from any claims, injuries or property damages resulting from my participation in club activities.</p>					
By signing, I/My family members and quests will abide by the by-laws of the Sevier Valley OHV Club(NO ALCOHOL) while participating in club events			X		
			X		