

Idaho Falls Trail Machine Association (IFTMA) Membership Application

Name: _____ Home Phone _____

Address: _____ City: _____ State: _____ Zip: _____

Please list all immediate family members (spouse/partner & children under 21 who live with you) to be included in the Membership:

By providing e-mail and cell phone numbers below, I/we agree to receive e-mails and text messages from IFTMA to keep us up-to-date on the club's activities.

Name	E-mail	Cell Phone	Gender	Age
1. _____	_____	_____	M / F	_____
2. _____	_____	_____	M / F	_____
3. _____	_____	_____	M / F	_____
4. _____	_____	_____	M / F	_____
5. _____	_____	_____	M / F	_____
6. _____	_____	_____	M / F	_____

RELEASE OF LIABILITY *(please read carefully before signing)*

I/We recognize that riding a motorized trail machine is a hazardous activity that can result in serious personal injury. I/we accept the risks inherent to riding with a group, including, but not limited to: obstacles on and off the roads and trails; rapidly changing weather; limited visibility; variation of slope and steepness on and off trails, surface or subsurface conditions on or off the trails and roads; collisions with other motorized vehicles including other riders; and collisions with other devices used to mark the boundary of trails and roads. In consideration of my/our participation in the events and rides of the IFTMA, I/we release and agree to hold harmless the IFTMA, its officers, directors, committees, and agents from all claims. I/we have read this agreement and the release of liability and fully understand its contents and agree that this is a contract between the IFTMA and myself/us and I/we sign of my/our own free will. My/our signature signifies that I/we have read and agree with this release.

Signature: _____ Spouse: _____

Parent (if under 18): _____ Date: _____

Annual Dues		\$25.00
IFTMA Stickers		
One free sticker included with membership (mark preference)	<input type="checkbox"/> Oval <input type="checkbox"/> Rectangle	No Charge
Oval	# _____ @ \$ 5 each	
Rectangle	# _____ @ \$ 5 each	
Set of Bike Fender Stickers	# _____ @ \$10 each	
Sponsorships: \$100 \$250	For more details, talk with an IFTMA officer	
Total Due		

MAKE CHECK PAYABLE TO:

Send to:

IFTMA
151 4th Street
Idaho Falls, ID 83401

QUESTIONS?

Call Ben at 523-7280
Visit: www.iftma.org

OFFICIAL USE ONLY

Date: _____ Membership Year: _____

Stickers Added to: Membership Texting E-Mail