

APPLICATION FOR MEMBERSHIP

Grafton Trail Riders, Inc. 29 Trail Riders Way Cropseyville, NY 12052

Name:		Signature:	Signature:	
Mailing Add	ress:			
Telephone No		Email:		
Driver's Lice	ense No			
Are you at l	east 16 years of age?	'□ Yes□ No *If under 16,	please complete back of form	
•		How long have you been ri		
-		o you ride in shows/gymkhaı Grafton Trail Riders or any ot		
		hen the Grafton Trail Riders ctivities listed below and che		
□ G ymkhana		□ Poker Run	□ National Trails Day	
□ Over the Mountain Ride		□ Summer Rides	□ Christmas Party	
□ Maintenance of club grounds		□ Repairs of club grounds	□ Competitive trail ride	
Comments:				
For GTR Offici	ial Use Only			
Signed: "Agreement, Relese and W "Horse Activities come with				
Dues paid	Senior □ Junio	r □ Amount paid \$		



APPLICATION FOR MEMBERSHIP

Junior Membership Application

Name:	
Age:	
Parent/Guardian's Name:	
Parent/Guardian's Address:	
	Phone:
I give my permission to allow the about rail Riders.	ove named minor to become a member of the Grafton
Signature of Parent/Guardian:	_
Date:	

Junior Membership may be granted to any person who:

- 1. Has a parent, legal guardian or close relative over the age of 21 who is a senior member and is present at the time of proposal by either a senior or junior member:
 - a. Is at least 9 but not yet 16 years old;
 - b. Need not be present when proposed
- 2. Has no parent, legal guardian or close relative who is a senior member at the time of proposal by either a senior or junior member:
 - a. Is at least 12 years old but not yet 16 years old;
 - b. Must be present when proposed.