

# SLOCAN VALLEY OUTRIDERS ASSOCIATION

**2016 MEMBERSHIP FORM**

## **Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_**

**Mailing Address:**

**Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-Mail:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_**

**Emergency Contact**:**Name & Phone#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### TYPE OF MEMBERSHIP

\_\_\_\_Junior $15.00

\_\_\_\_Senior $25.00

\_\_\_\_Family $40.00

Please list names of Family / Junior members included in membership:

2015 HCBC Membership #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: All members must have current HCBC membership.

Parent or Guardian for Jr. members:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ please print name.

Signature of Parent or Guardian for Jr. members:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_sign.

**Consent For Electronic Communication: YES or NO**

Please circle “Yes” if you wish to receive e mail, e-newsletters and other electronic communications from Slocan Valley Outriders Association or “NO” if you do not wish to receive it.

To stop receiving at any time send written instructions to the address below.

Mail to: SVOA, Box 81, Slocan, B. C. V0G 2C0