



Western Slope 4 Wheelers Club Membership Application
P.O. Box 2037, Montrose, CO 81402 www.ws4w.com



Full / Family Membership _____

Associate Membership _____

1 vote per Full/family membership

Associate membership is Non-Voting

Membership Dues are listed on the web site under "Membership" on the menu

Spouse / Partner Name: _____

Mailing Address: _____

Add to contact email/phone tree (only name, phone and email address for use by members)
YES NO (circle one)

Home Phone: _____ Cell Phone: _____

Email: _____

4x4 Make/Model: _____ Modifications & Equipment: _____

I understand and acknowledge that my participation off highway travel, aka four-wheeling, is purely voluntary. I further understand and acknowledge the fact that off highway travel is a recreational activity and is an inherently dangerous and hazardous activity. I accept the risks and hazards of the same, including without limitations the risks of personal injury or death.

The undersigned do hereby, for myself, my heirs, executors, administrators and assigns, **RELEASE, ACQUIT, AND FOREVER DISCHARGE AND HOLD HARMLESS** the Western Slope 4 Wheelers Club, and the organizers and participants of club events in which we participate. I hereby covenant not to sue, and release the Western Slope 4 Wheelers club, its respective officers, directors, members, and event participants, from any and all claims, demands, damages, fees or cost of any nature arising out of my participation.

I attest and verify that I will be responsible for any injury to myself or to anyone for whom I am responsible, and I will be responsible for any damage to my vehicle, while attending a Western Slope 4 Wheelers Club event. Furthermore, I certify that my vehicle meets the safety requirements for legal operation in the State of this activity.

I fully recognize that by signing this membership application I am releasing all parties connected with the Western Slope 4 Wheelers Club from any and all liability that may arise out of any injury and/or death that I or my passengers may suffer while engaged in the activities or riding in a participant's vehicle, or during any other club event. **I acknowledge that no alcohol or non-prescription drugs are allowed on the trail and agree to abide by this rule.**

Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

WS4W Dues are not tax deductible