



Stillwater Trailriders, Inc.
ANNUAL MEMBERSHIP-PERMIT FORM
*** MEMBERSHIP-PERMITS REQUIRED**
FOR ALL – Riders and Non-riders

Permit #:	_____	Exp	_____
Date Rcd:	_____	By:	_____
Amount Pd:	_____		
How rec'd:	_____		

Questions: 580-628-1095

LIABILITY WAIVER

The undersigned agree that the Stillwater Trailriders, Inc. or any of its agents, agencies, boards, staff, members, directors, and officers, shall be released from liability, claims or demands whatsoever in the event of any accident or injury to said person using the Stillwater 500 Park resulting directly or indirectly from their presence on the property.

- All persons are to be able to produce for inspection, their Permit, upon request by local law enforcement and/or a Stillwater Trailrider, Inc. representative.
- All persons must follow all rules, posted signs, regulations, and safety markers.
- No alcoholic beverages can be consumed on the property.
- No campfires.
- No overnight camping except during sponsored events.
- All riders must wear protective helmets, eyewear, and other appropriate protective gear.
- All children under 16 must be accompanied by parent or guardian.

PRIMARY PERMIT HOLDER	PRINT CLEARLY!!!
Name: _____	Home Ph: _____
Person to receive Membership-Permit, newsletter, vehicle decals, & helmet stickers.	
Address: _____	Cell: _____
City: _____	St: _____ Zip: _____
Email: _____	<input type="checkbox"/> New Member <input type="checkbox"/> Renewal

LIABILITY WAIVER - Each person that will ride or be present on the premises of the Stillwater 500 Park must sign indicating that he/she has read and agrees to adhere to the Liability Waiver, rules, and regulations: (Parent/Guardian must sign for each minor child.)

I agree 1.	_____	_____	_____	_____	_____	_____
	Print Name of Primary Permit Holder	DOB	M/F	R-Rider OR N-Non-Rider	Signature (or Parent/Guardian Signature)	Date
I agree 2.	_____	_____	_____	_____	_____	_____
	Print Name of 2 nd Rider	DOB	M/F	R-Rider OR N-Non-Rider	Signature (or Parent/Guardian Signature)	Date
	Email: _____			Cell: _____		
I agree 3.	_____	_____	_____	_____	_____	_____
	Print Family Member Name	DOB	M/F	R-Rider OR N-Non-Rider	Signature (or Parent/Guardian Signature)	Date
	Email: _____			Cell: _____		
I agree 4.	_____	_____	_____	_____	_____	_____
	Print Family Member Name	DOB	M/F	R-Rider OR N-Non-Rider	Signature (or Parent/Guardian Signature)	Date
	Email: _____			Cell: _____		

MEMBERSHIP- _____ **\$75 includes up to 2 Motorcycles or ATVs and for Families with children under 18**
PERMIT FEE: _____ **\$25 for one additional vehicle decal (optional)**

DISPLAY helmet stickers on back of helmet and vehicle decals on driver's-side back window.

Mail to: Stillwater Trailriders, Inc.
 401 Echo Lane, Morrison, OK 73061

Or Purchase at Stillwater Powersports OR Honda of Stillwater
Or Email to: rstacy3@hotmail.com **Or text to:** 580-628-1095