



Membership Form

Last Name:	First Name:
Address:	E-mail:
City:	Postal Code:
Telephone #:	Gender:
Have you completed the TRMBA waiver: <input type="checkbox"/> Yes	
What is your primary riding style? <input type="checkbox"/> Downhill/Enduro <input type="checkbox"/> (XC) Cross Country <input type="checkbox"/> Road Touring <input type="checkbox"/> Commuting/Town <input type="checkbox"/> Dirt Jump	

About your membership:

Join our exciting club as we work to develop Tumbler Ridge into a world class mountain biking destination

Additional contributions:

- Donations: \$ _____
- Volunteer Interests: _____
 - E.g. fundraising, social events, race events, trail maintenance, ride leaders, bike to work week
 - Special skills: E.g.: carpentry, GPS/mapping, first-aid, photography, communications, bookkeeping, etc

Permissions:

The Tumbler Ridge Mountain Bike Association has permission to:

- Take photos of me at events for use in promotional materials: Yes No
- Contact me with offers, promotions and events exclusive to club members: Yes No
- Send me a newsletter updating me on the Associations activities: Yes No

Please make a cheque or money order payable to:

Tumbler Ridge Mountain Bike Association
 PO Box 1344, Tumbler Ridge, BC, V0C 2W0

Membership Fee (Annual, 50% off after July 1st)

Single Person Membership \$20.00

Date:	For office use only
Payment:	
Cash Cheque	Initials:



Comments or inquiries: tumbleridge@gmail.com

Family Membership Form

Last Name:	First Name:
Additional family member names:	
Address:	E-mail:
City:	Postal Code:
Telephone #:	Gender (of primary applicant):
Have ALL family members completed the TRMBA waiver: <input type="checkbox"/> Yes	
What is your primary riding style? <input type="checkbox"/> Downhill/Enduro <input type="checkbox"/> (XC) Cross Country <input type="checkbox"/> Road Touring <input type="checkbox"/> <input type="checkbox"/> Commuting/Town <input type="checkbox"/> Dirt Jump	

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Membership Fee (Annual, 50% off after July 1st)

Family membership \$50.00

Comments or inquiries: tublerridgemba@gmail.com

Date:	For office use only
Payment:	
Cash Cheque	Initials: