

SATRA 2020 MEMBERSHIP APPLICATION

SATRA, Inc.

PO Box 720

Fulton, NY 13069

<http://www.satramx.com>

E-mail: satramxclub@gmail.com

Please Print Legibly

Name: _____ Date of birth: ____/____/____
(You must be at least 18)

Address: _____

City: _____ State _____ Zip _____

E-mail address _____ Phone # (____) _____

WORK REQUIREMENT: TWO WORKDAYS, OF WHICH ONE WORKDAY MUST BE FLAGGING

I CAN WORK:

Unadilla

Sat/Pro

Aug 15

THERE IS ONLY ONE FLAG DAY THIS YEAR, MAKE SURE YOU VOLUNTEER TO DO A RIDE SIGN-IN.

PLEASE REFERENCE THE SCHEDULE AND PICK A SIGN-IN DATE

I WOULD LIKE TO DO SIGN-IN AT THIS RIDE: _____

Additional Family Members (must be your spouse or child under 18):

Dependents* who ride age 18-21 included as well, must work same as an individual member (2 workdays minimum)

**A dependent is defined as an immediate family member—son or daughter only.*

Name: _____ Date of Birth: ____/____/____

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We do not accept applications at rides unless you have made prior arrangements with a SATRA officer. Also, you must bring your membership card to all rides!

Membership Type: (Circle One)	Sustaining (non-riding) (\$25)	Individual (\$120)	Family (\$140)	Individual/Family "non-working" (\$375)
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PLEASE MAIL YOUR COMPLETED APPLICATION TO THE ABOVE ADDRESS.