FLORIDA CRACKER TRAIL ASSOCIATION

"Keeping History Alive"

2017 MEMBERSHIP APPLICATION

Membership in the FCTA is mandatory to participate in any FCTA events. Membership runs the calendar year from January through December 31st.

Please choose the TYPE OF MEMBERSHIP that best suits you. A family is defined as up to (2) adults and minor children residing at the same address. Any additional family members over 18 years residing at the same address may pay $10.00 to have membership voting privileges.

_____ New Membership _____ Renewal

_____ Single Adult $ 25.00 _____ Family $35.00 _____+$10.00 any family member over 18yrs

MEMBER NAME: _____ Birth Date: _____

The FCTA will communicate with our members through E-mail and our website: www.crackertrail.org

Please check here: _____ if you Do Not have an email and need to receive information via regular mail.

_____

Mailing Address City State Zip County

Home Phone: _____ Cell Phone: _____ Email: _____

EMERGENCY CONTACT: _____ PHONE NUMBER: _____

What years have you ridden on Annual Ride? _____

FAMILY MEMBER(S):

Spouse or Significant Other: _____ Birth Date: _____

NOTE: Parent or Guardian must accompany minor children under the age of 18.

Family Member 1: _____ Relation: _____ Birth Date: _____

Family Member 2: _____ Relation: _____ Birth Date: _____

Family Member 3: _____ Relation: _____ Birth Date: _____

Family Member 4: _____ Relation: _____ Birth Date: _____

Family Member 5: _____ Relation: _____ Birth Date: _____

WARNING: Under Florida law, an equine activity sponsor or equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities. (Florida Statutes 773.01-773.05)

Initials in acknowledgment of Membership Form: _____

Make checks payable to: Florida Cracker Trail Association or FCTA.

MAIL TO: FCTA- Secretary; 11932 Helicon Avenue Port Charlotte, FL 33981

Questions? Email: fctasecretary@gmail.com

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