



ALBERTA TRAIL RIDING ASSOCIATION

2017 Membership Application / Renewal

Calendar Year: Jan 1st to Dec 31st

New Membership

Single Membership

\$20

Number of Adults

Renewal

Family Membership

\$35

Total Number in Family
Parents and children under
the age of 17 living at home

*Please make your
cheques payable to*

ATRA

___ Number under
17 years of age

___ Number over
65 years of age

Surname	
First Name(s)	Address
	City
Phone No	Postal Code
Email Address	

Please indicate your level of activity with ATRA: (please check one)

ACTIVE (participating in riding events, clinics, rides, and mountain rides, etc.)

NON-ACTIVE (non-riding, participating in meetings & social events only)

FOR INSURANCE PURPOSES, each ACTIVE MEMBER is required to hold a **current** ALBERTA EQUESTRIAN FEDERATION (AEF) membership.

Please provide your current AEF number: _____

(for AEF membership information, please visit www.albertaequestrian.com OR call 1-877-463-6233)

ATRA collects, uses or discloses personal information only to the extent necessary to meet the purposes of the creation and maintenance of current records on membership and for contacting individuals to notify them of ATRA news and events. ATRA may distribute your contact information to other ATRA members by way of a membership list. ATRA may use your name or likeness in newsletters, brochures or on the ATRA website. ATRA and its agents do not disclose personal information except where permitted by law. By signing this membership application/renewal form, you are deemed to consent to the collection, use and disclosure of your personal information as set out above.

Signature		Date	
<p><i>Please mail form & payment to:</i> Cindy Hanas 25 Linden Street South, Spruce Grove AB T7X 2G6</p>			
For Office Use	Date Received	Cash	Cheque