



ASSOCIATE MEMBERSHIP RENEWAL for 2012

(Please Print)

Name: _____
Last First Initial

Address: _____
Street City/Town Postal Code

Contact: _____
Home Phone Cell Phone E-Mail Address

ATV Operator Safety Training _____
Yes/No

Birth Date ____/____/____
dd mm yyyy

Completion of this membership renewal form confirms your commitment to remaining an active member in SMATVA (Safety Minded ATV Association).

It also ensures your membership information on file is accurate and up to date.

A fee of \$15.00 must accompany this application. This fee is for the calendar year of 2012.

Membership in SMATVA is based on the calendar year. It must be renewed annually. Unless renewed for 2012, your membership will expire on 31 December 2011

I agree to abide by the bylaws of the Safety Minded ATV Association.

Signature

Date