

**Weyburn Motocross Association**  
**2017 Annual Membership / Day Pass**

Date: \_\_\_\_\_

Membership Type:

Day: \$20

Single: \$130

Family: \$180

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

List All Bikes to be used under membership

List All Riders Names

Age

Make	Size	List All Riders Names	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Mailing/Street Address: \_\_\_\_\_

City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

HomePhone: \_\_\_\_\_ Cell: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Cell: \_\_\_\_\_

Weyburn Motocross Association – Day Pass Receipt 2017

PAID \$20

Date Valid: \_\_\_\_\_ Rider Name: \_\_\_\_\_ Please

respect the facility, the volunteers and fellow riders. Safety gear must be worn at all times including helmet, gloves, long sleeve shirt and boots. Please DO NOT leave your garbage. If you wish to become a member, please visit our website at ( [www.weyburnmx.com](http://www.weyburnmx.com) ) for more information. Have a safe Day!

Authorized Signature: \_\_\_\_\_

**This form is to be used in conjunction with a Waiver form. You are still not eligible to ride on the track until the waiver forms have been signed, regardless whether or not payment has been made.**