

OAC Membership number 09-_____

Ouachita ATV Club.com

P.O. Box 681
Mena, AR 71953

Membership Application

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip code: _____

Home Ph. _____ Cell Ph. _____

E-mail: _____

Membership Level:

___ single \$15.00 ___ family \$25.00 ___ group \$75.00 (10 or less) ___ club sponsor \$250.00

Off Highway Vehicle Affiliations: _____

ASI Certified #: _____ Chain Saw Certified Date: _____

Membership is for (1) one year beginning January 1st and ending December 31st. Make checks Payable to Ouachita ATV Club.

List all Member names:

Primary: _____

Member 2: _____

Member 3: _____

Member 4: _____

Member 5: _____

Member 6: _____

Member 7: _____

Member 8: _____

Member 9: _____

Member 10: _____

The Mission of Ouachita ATV Club is to bring together Off-Highway Vehicle enthusiasts to enjoy, Promote and protect responsible OHV recreations activities. Thank You!