



BLACK HILLS 4 WHEELERS

Family Recreation • Safety • Road Courtesy • Rescue

P.O. Box 1354 Rapid City, South Dakota 57709

APPLICATION FOR

REGULAR MEMBERSHIP
ASSOCIATE MEMBERSHIP

DATE: _____

NAME: _____ OCCUPATION: _____
 ADDRESS: _____
 CITY: _____ STATE: _____ ZIP CODE: _____
 HOME PHONE: _____ CELL: _____
 EMAIL: _____

SPOUSE: _____ OCCUPATION: _____
 EMAIL: _____ CELL: _____

CHILDREN: _____ AGE: _____
 CHILDREN: _____ AGE: _____
 CHILDREN: _____ AGE: _____
 CHILDREN: _____ AGE: _____

TYPE OF 4X4: _____ YEAR: _____
 PREVIOUS 4X4 MEMBERSHIPS: _____

OFFICIAL USE ONLY

DATE APPROVED: _____
 AMOUNT PAID: _____
 RECEIVED BY: _____

General Terms:

Dues are \$45.00 for the 1st year and \$35.00 every year after, must be paid by the 2nd general meeting of the year

Regular Members: Attend 2 meetings, 3 trail rides, and 1 community service event per year to remain in good standing

Associate Members: Eligible for special use trail rides, no voting rights and pay for all events attended