



Club REGISTRATION FORM

Please Print Legibly.

Member Number: _____

I want to sign up as a Guest _____ or an Annual Club Member _____

Purchase Date: _____

Last Name: _____

First Name: _____

Phone number: _____

Email: _____

Mailing Address: _____

Emergency Contact Information:

Last Name: _____

First Name: _____

Phone number: _____

Additional number: _____

Relationship to you: _____

I _____ have read and understand the rules and waiver information for Rivers Edge Outdoors. By signing this form I am admitting that I am willing to abide by the rules, and understand that breaking the rules could result in an immediate, NON-REFUNDABLE termination of my relationship with Rivers Edge Outdoors, LLC.

Signed: _____

Date: _____