

# MEMBERSHIP APPLICATION

Trail Riders of DuPage  
PO Box 616  
Warrenville, IL 60555-0616  
630-293-TROD  
Web: <http://trod.us> E-mail: [info@trod.us](mailto:info@trod.us)

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

E-mail: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_ Work/cell phone: \_\_\_\_\_

Barn location: \_\_\_\_\_ County: \_\_\_\_\_

This membership represents \_\_\_ adult(s) \_\_\_ children (under 18) and \_\_\_ horse(s)

<b>PLEASE CIRCLE ONE:</b>	Single: \$18	Family: \$28
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<b>PLEASE CIRCLE ONE:</b>	New Membership	Renewal
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Please make your check payable to:



PO Box 616  
Warrenville, IL 60555-0616

If you have any questions regarding membership or expiration  
please contact **[membership@trod.us](mailto:membership@trod.us)**.

Do you attend meetings? \_\_\_\_\_ Ride in parades? \_\_\_\_\_ Own a trailer? \_\_\_\_\_

Are you interested in group trail rides? \_\_\_\_\_ Equine Training? \_\_\_\_\_

Being trained in ERT? \_\_\_\_\_ Social Events? \_\_\_\_\_ Trail Advocacy? \_\_\_\_\_

I am interested in helping with \_\_\_\_\_

For meetings, topics or speakers I suggest \_\_\_\_\_

\_\_\_\_\_