

**NORTHUMBERLAND COUNTY
Anthracite Outdoor Adventure Area Authority**



RECREATION OPPORTUNITIES - ECONOMIC DEVELOPMENT - CONSERVATION OF NATURAL RESOURCES-
www.anthraciteadventure.com

| |
|------------------------------|
| INTERNAL USE ONLY PASS #S |
| PRI. _____ |
| 1. _____ |
| 2. _____ |
| 3. _____ |

Anthracite Outdoor Adventure Area (AOAA) Pass Application
PRIMARY PASS HOLDER INFORMATION

X _____ X _____
FIRST NAME, M.I. LAST NAME

X _____
MAILING ADDRESS (CITY, STATE, ZIP, COUNTY)

X _____ X _____
E-MAIL ADDRESS TELEPHONE NUMBER

_____ X _____
EMERGENCY CONTACT NAME EMERGENCY NUMBER

| VEHICLE TYPE | MAKE | LICENSE # | COLOR |
|--------------------------------------|------|-----------|-------|
| CLUB OR GROUP AFFILIATION IF ANY: | | | |
| FAMILY PASS RIDER INFORMATION | | | |

1) _____
NAME RELATIONSHIP TO PRIMARY MEMBER AGE

1) _____
VEHICLE TYPE MAKE LICENSE # COLOR

2) _____
NAME RELATIONSHIP TO PRIMARY MEMBER AGE

2) _____
VEHICLE TYPE MAKE LICENSE # COLOR

3) _____
NAME RELATIONSHIP TO PRIMARY MEMBER AGE

3) _____
VEHICLE TYPE MAKE LICENSE # COLOR

Please make check out to:
Eagle Valley Off Roaders

2014
Wheelin 4 Wishes Benefit Ride
October 11, 2014



Mail to:
EVOR Treasurer Ketchum
70 Maggs Road
Beech Creek PA 16822

\$35.00 per vehicle fee
\$15.00 per vehicle Season Pass holder fee # _____

***** PLEASE READ AND INITIAL, THAT YOU HAVE*****

-Received a copy of the AOAA rules & regulations and agree to abide by them. _____ Initial
-Signed an AOAA waiver of liability form and take responsibility for all actions of those named on this form. _____ Initial
-By signing below, I agree to abide by the rules of the AOAA. Failure to follow these rules and act in a responsible manner may lead to my pass being forfeited and access denied to the AOAA riding area.

X _____ X _____ X _____
SIGNATURE PRINT DATE