

# MEMBERSHIP FORM

**Three Rivers Back Country Horsemen  
PO Box 251  
Dillon MT 59725**

## Membership Dues

Individuals \$20.00      Family \$28.00 (No of persons) \_\_\_\_\_ Business \$30.00

NAME: (S) \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

PHONE: HOME (     ) \_\_\_\_\_ / \_\_\_\_\_ WORK (     ) \_\_\_\_\_ / \_\_\_\_\_

CELL PHONE: \_\_\_\_\_ / \_\_\_\_\_ E-MAIL \_\_\_\_\_

MY (OUR) INTEREST ARE:

Work Projects      Public Land Issues      Planning Activities      Training & Education

Other \_\_\_\_\_

\_\_\_\_\_