

Mohonk Preserve Individual Membership Application

IMPORTANT: Please read this statement before applying for membership to the Mohonk Preserve

I (we) enter upon and use the Mohonk Preserve for recreational activities such as climbing, biking, hiking, horseback riding, and similar activities with full knowledge of the dangers involved. I (we) understand that the Mohonk Preserve and the Mohonk Mountain House do not maintain the rocks, cliffs, or other natural features of the terrain. It is understood that the carriage roads are not specifically maintained for horses, carriages or bicycle riding and that the trails are for foot traffic only. Bikers and horseback riders must wear helmets at all times when riding. Neither the Mohonk Preserve nor the Mohonk Mountain House are responsible for climbing protection on the cliffs. In becoming an Associate Member of the Mohonk Preserve, I (we) agree to be responsible for our own safety and welfare, and for any minors in our charge, and agree to release and indemnify Mohonk Preserve and Mohonk Mountain House directors, officers, employees, and agents from and against all actions, claims or cost for injuries or damage arising from or relating to my (our) activities or those of minors in my (our) charge on the properties owned by them. I (we) agree that if there is any claim or dispute that arises out of my (our) use of their properties or facilities or the use by minors in my (our) charge that results in any legal action being brought as a result of such as all issues will be settled by Courts of the State of New York, Ulster County, which we agree shall have exclusive jurisdiction over every party in connection with such dispute, lawsuit or claim. I (we) understand that access to the Mohonk Preserve may be revoked for failure to obey instructions of Preserve staff or for conduct that is dangerous or disturbing to other visitors or Preserve staff, destructive of Preserve property, illegal or otherwise in violation of Preserve rules and policies.

Name (s)	Choose One Membership					Options		Total
	Basic	Senior	Student	Additional Adult	Additional Dependent	Rock Climbing	Biking	
	\$55	\$40	\$40	\$20	\$5	\$35	\$15	

Address: _____
City: _____ **State:** _____ **Zip:** _____
Phone: (____) _____
Email: _____

Yes, I (we) apply/reapply for membership in the Mohonk Preserve and accept the privileges and responsibilities as outlined in the statement above.
Signature (required) _____ **Date:** _____

Sub Total	
Donation	
Total	

Payment Information

___ **Check** (payable to Mohonk Preserve, Inc.)
 ___ **Cash** (please do not mail)
 ___ **MasterCard/Visa/American Express**
 Acct # _____ Exp. Date _____

Premium Memberships

___ Supporting:	\$300	
___ Sustaining:	\$500	
___ Sentinel:	\$1,000	
___ Lifetime:	\$3,000	

Please fill in, and print form, then either mail or fax it to:
 Mohonk Preserve, Inc.
 P.O. Box 715
 New Paltz, NY 12561-0715
 fax (845) 255-5646