



HI-LANDERS 4WD CLUB
P.O. Box 291
Citrus Heights, CA. 95611-0291

Hi-Landers 4WD Club Guest/Participant Emergency Data/Agreement Form

Guest/Participant Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email Address: _____

Driver's License Number: _____ State of Issuance: _____

Vehicle Year: _____ Vehicle Make: _____ Vehicle Model: _____

Vehicle License Plate: _____ State of Issuance: _____

In Case of Emergency contact: _____

Contact Relationship: _____ Contact Phone Number: _____

Are you a member of a flight ambulance service? (i.e. Life Flight/Cal Star) Yes: _____ No: _____

If yes...what service: _____

Hospital preference (if any): _____

Medical Insurance carrier/policy (Optional): _____

I am a guest of _____, who is a member of the Hi-Landers 4WD Club and is sponsoring me at this event. As a guest/participant of the Hi-Landers 4WD Club I agree to abide by all state, local, forest service laws and the Hi-Landers Club By-Laws/SOP's. I will follow all Trail Boss/Group Leaders instructions and conduct my behavior in a responsible manner at all times. If I have any questions/concerns I will address them with the Trail Boss/Group Leader.

Signed

Date