



**FRONTIER 4x4 Club**  
**MEMBERSHIP INFORMATION FORM**  
**MEMBERSHIP YEAR : 2025**

**DATE:** \_\_\_\_\_

***Please check one:***      **Renewal:** \_\_\_\_\_      **New Member Application:** \_\_\_\_\_

**NAME:** \_\_\_\_\_      **EMAIL ADDRESS:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_      **City:** \_\_\_\_\_      **Zip:** \_\_\_\_\_

**CELL PHONE:** \_\_\_\_\_      **HOME PHONE:** \_\_\_\_\_

**(OPTIONAL:) SPOUSE'S NAME:** \_\_\_\_\_

**(OPTIONAL:) CHILDREN: Y N – How Many?:** \_\_\_\_\_

**PRIMARY OFF-ROAD VEHICLE DESCRIPTION:**

This information simply helps up know what your vehicles capabilities are.

Make \_\_\_\_\_ Model: \_\_\_\_\_ YEAR: \_\_\_\_\_

4 wheel drive capable? Y - N      Tow Points? Front: Y N -- Rear? Y - N

Locker(s)?: Front: Y - N – Rear? Y - N      Tire Diamiter?: \_\_\_\_\_

Solid roof **OR** role cage? Y - N      Fire Extinguisher? Y - N

Seatbelts for all human occupants? Y - N

**DUES:**

**\$50.00 / YEAR SINGLE OR FAMILY**

**(\$25. 00 for Frontier & \$25.00 for Montana 4X4 Association & United 4X4 Association)**

**Please makes checks payable to: Frontier 4 Wheelers**

**After meeting the general requirements for membership of attending two consecutive meetings and joining one official club trial ride, current members will vote on allowing perspective members to join.**

---

***For Frontier 4 Wheelers Officer Use Only:***

Date of payment: \_\_\_\_\_ AMOUNT: \$ \_\_\_\_\_

Method / Amount of Payment: Cash: \_\_\_\_\_ or Check: \_\_\_\_\_ Check# \_\_\_\_\_

Recording officer: \_\_\_\_\_