Cherry Valley Riders

T.R.A.P.

TRAIL RIDERS AWARD PROGRAM

LOG SHEET

DATE	PLACE	COUNTY	CONDITION	HOURS

T.R.A.P. APPLICATION

Sign me up!

Member name: _____

Member name: _____

Member name: _____

$5.00 Per Rider

Send payment to: ***Cherry Valley Riders P.O. Box 87, Duvall WA 98019***

Initial applicants may log hours beginning the 1st day of the month of application.

Application and renewal may also be designated on the annual membership form.

www.cherryvalleyriders.org