



151 North Auringer Road Constantia, New York 13044 315-623-7264
www.trailpass.com

Parks Application

Please print clearly

Date: _____

Park Name: _____

Owner: _____

Park Address: _____

Mailing Address: _____

Phone: _____

Fax: _____

Email: _____

Website: _____

Secondary contact Person: _____

Phone: _____

Do you want to participate in the TrailPass™ liability coverage? YES / NO

If yes, how many riders per year do you have? _____

How many miles of trail do you have? _____

Are you interested in being TrailPass™ Exclusive Park? YES / NO

Dates & Hours of operation:

Months (circle all that apply): J F M A M J J A S O N D

Are you open weekdays? YES / NO

Holidays? YES / NO

Hours of Operation: _____

Will you be closing for hunting season? YES/NO

Circle all amenities and list all fees that apply.

- YES / NO TrailPass for sale at gate
- YES / NO Are you offering a discount to TrailPass members?
If yes/ how much? _____
- YES / NO Day Passes available? \$_____
- YES / NO Annual memberships Available \$_____
- YES / NO Parking Fee \$_____
- YES / NO Overnight camping \$_____
- YES / NO Reservations needed
- YES / NO Restrooms
- YES / NO Porta-potty
- YES / NO Showers
- YES / NO Picnic area
- YES / NO Children's play area
- YES / NO Concessions (attach list)
- YES / NO Pool
- YES / NO Other entertainment _____
- YES / NO MSF/ASI Training site
- YES / NO ATV wash down station \$_____
- YES / NO ATV Parts and accessories for sale
- YES / NO Participating dealer within 20 miles (attach list)
- YES / NO Park calendar of events (attach)
- YES / NO Gas on site or nearby

Safety Information

- YES / NO Do you have a first aid kit on site?
- YES / NO Do you have emergency phone numbers posted?
- YES / NO Do you have an emergency action plan?
- YES / NO Do you require riders to be registered and insured?
- YES / NO Do you allow 2-up riding?
- YES / NO Do you have a minimum age requirement for riders?
If yes what is the age? _____
- YES / NO Do any of your trails cross highways or railroad tracks?
- YES / NO Are any of your trails near a barbed wire or "piano wire" fencing?
- YES / NO Do you require riders to wear safety gear?
If yes...please list REQUIRED gear below

Please list any areas that you think might be considered dangerous **on or close** to your trail or riding park:

Please submit the following information with your application:

1. A signed landowner consent form from each landowner.
2. Digital photos of your park. (Be sure to include photos of signage, the track or trails, any spectator areas and the parking area.)
3. A GPS map of the trails (if you have one) indicating the difficulty level of each trail.
4. A detailed description of the type of riding that you offer. (For the web)
5. A detailed list of membership fees and discounts that you offer.
6. Anything further that you would like us to consider on your application.

If you are requesting insurance coverage under our Commercial General Liability Policy fill in below:

Requested Insurance Effective Date: _____

Is your Park insured now? _____

Prior Insurance Company: _____

If your Park has been previously insured, attach 4 years of prior insurance company claims experience.

YES / NO Is your Park now, or has your Park **EVER** been involved in a lawsuit?
If yes.... please describe in detail on a separate sheet. Be sure to include dates and as many details as possible.

Signature of Authorized Representative

Submit Completed Application and required documents to:

Lee Ann Harris
TrailPass, LLC Executive Director
151 North Auringer Road
Constantia, New York 13044
Telephone: 315-623-7264
Email: lharris@trailpass.com

