

Western Riding Club

APPLICATION FOR MEMBERSHIP

Name:

Male () Female () Home Telephone Cell Phone Occupation
Spouse:

Male () Female () Home Telephone Cell Phone Occupation
Address: _____
Street City Zip

Email(s): _____

Children:

1. _____ Age: _____ m/f 2. _____ Age: _____ m/f
3. _____ Age: _____ m/f 4. _____ Age: _____ m/f

Agreement, Waiver & Release

We, the undersigned, hereby apply to the Western Riding Club for membership, it being understood that this application for membership shall be submitted to the club's secretary and if approved by a majority vote at a monthly club meeting, we agree to abide by all of the by-laws, rules and regulations of the club. In as much as this is a western riding club, we do own a riding horse or horses, and we are able to ride attired in western costume and equipment, without injury to horse or riders. In consideration of such approval and acceptance, we further agree not to hold liable or sue said club or any of its officers, agents, servants or employees on account of any personal injury, property damage, or any claim or demand whatsoever by reason, or as a result of, any accident or injury to any person, equipment, or property and agree to indemnify and hold the club harmless against any claim or demand made for or on our behalf in connection with any claim demand whatsoever against said club, it's officers or agents. We further agree to endeavor to be active participants in club activities in so far as we are able and to accept the duties of an active member in the form of committee participation, holding of office or appointments, and attendance at meetings and functions and maintaining and improving the facilities. After the first year of membership, I/we will be willing to serve on one or more of the various committees listed:

Audit Nominations Membership Hospitality
 Playdays Fund Raisers Dance Historian
 Property Royalty Parade Entertainment
 Rides Calling Building/Maintenance Refreshment

Signature of Applicant (s): _____ / _____

Co-Signature for Minor Children _____

Dated this _____ day of _____ 20____

Sponsored by: (Name) _____ (Telephone) _____

(Name) _____ (Telephone) _____

Accepted and Approved on the ____ day of _____ 20____

Signature of President _____

Membership Dues

Initiation Fee \$30.00 Single Adult Yearly \$30.00 Family (2 or more) Yearly \$45.00

Amount Paid: \$ _____