MOJAVE RIVER VALLEY HORESMEN'S ASSOCIATION

P.O. Box 171 Apple Valley, CA 92307 Website: mrvha.com

Serving The High Desert Community Since 1977

MEMBERSHIP APPLICATION

_____
Date

_____ _____ _____
Last Name **First Name** **Birth Date**

_____ _____ _____
Last Name (Spouse/Significant Other) **First Name (Spouse/Significant Other)** **Birth Date**

_____ _____
Address **Phone**

_____ _____
City **Zip Code**

_____
Email **(You will be notified of meetings and show dates by email)**

Children:

_____ _____ _____
Last Name **First Name** **Birth Date**

_____ _____ _____
Last Name **First Name** **Birth Date**

_____ _____ _____
Last Name **First Name** **Birth Date**

Type Of Membership: ☐ **New** ☐ **Renewal**

☐ **Lifetime (single membership only) $200** ☐ **Family $30**

☐ **Individual Adult $25** ☐ **Individual Junior $15 (18 & Under)**

By signing this Membership Application, Member agrees to abide by Mojave River Valley Horsemen's Association (MRVHA) Rules and Regulations. Further, Member acknowledges that every entry at a MRVHA Show shall constitute an agreement and affirmation that the person making it, along with the owner, lessee, trainer, agent, coach, driver, rider, and the horse, or any of their agents or representatives acknowledge that they participate voluntarily in the competition fully aware that horse sports and related competition involve inherent dangerous risk and by participating, they expressly assume and all risk of injury and/or loss, and they agree to hold MRVHA, their officers, board of directors, officials employees, volunteers, and members harmless for any injury or loss resulted directly from the negligent acts or omissions of said officers, board of directors, officials employees, volunteers, members, other exhibitors and spectators.

_____ _____
Signature **Parent's Signature For Junior (no voting privileges)**

For Club Use Only

Date Paid: _____ ☐ *Paid on Show Bill* *Amount:* _____ ☐ *Cash* ☐ *Check* *Check#* _____ *Int.*_____

Rev: 3/17/2018