

PRESCOTT SADDLE CLUB
P.O. Box 11052, Prescott, AZ 86304

Membership Application Renewal And Liability Release

(Revised 2/2007) In consideration of acceptance of my membership by the Prescott Saddle Club and my being permitted to participate in any club sponsored event or activity, I, for myself, my heirs, executors, administrators, successors, and assignors, do waive, release and discharge all claims for damages resulting from death, personal injury or property damage which I may have, or which may hereafter accrue to me as a result of my participation in such events or activities. I understand this release is intended to discharge and release, in advance, the Prescott Saddle Club, its members and their respective agents, officers, servants, employees, and representatives from and against any and all liability arising out of, or connected in any way, with my participation in any club-sponsored event or activity, even that liability may arise out of negligence or carelessness on the part of the persons or entities mentioned above. All family members please sign (parent or guardian if under 18 years of age). I agree to abide by all club and trail ride rules. I understand that I will receive and read the club rules and regulations/bylaws after my acceptance into the club. I also understand that my/our application may be rejected. I have read and understand the release agreement as a condition of membership into the club with my signature.

Note: Stallions or dogs are not allowed on club rides.

CHECK ONE: **NEW MEMBER APPLICATION** **RENEWAL**

APPLICANT NAME (Print) _____

Applicant's Signature _____

SPOUSE NAME (Print) _____

Spouse Signature _____

PLEASE PRINT BELOW: THE NAMES AND AGES OF ALL MINOR CHILDREN COVERED BY THIS APPLICATION AND RELEASE.

CHILDREN'S NAME(S) AND AGE(S) _____

MAILING ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

HOME TELEPHONE # _____ CELL PHONE # _____

E-MAIL ADDRESS _____

CHECK ONE: **Family Membership \$35.00** **Single Membership \$25.00**

Please make check or money order payable to Prescott Saddle Club and send with signed application/release to:

Prescott Saddle Club, P.O. Box 11052, Prescott, AZ 86304

Application Approved by: _____ Date: _____

P.S.C. Board Member

(Optional)

Please include information about yourself (to be included in the newsletter) on the reverse side of this application.