



NEVADA COUNTY HORSEMEN, INC.
 10600 Bubbling Wells Road, Grass Valley
 Mailing address:
 2036 Nevada City Hwy., PMB 286
 Grass Valley, CA 95945

Paid ____/____/____
 check# ____
 cash ____
 Received by _____

www.nevadacountyhorsemen.org

2016 MEMBERSHIP APPLICATION

Membership Type: Life Family \$75.00 Single \$50 Junior \$25

___ Check if Membership is a renewal. [Renewals with no more than two (2) years separation from NCHI do not need a Sponsor]

Name: _____

Occupation _____ Last Name _____ First Name _____ Spouse _____
 Occupation _____ Occupation _____

Mailing Address: _____
 Street _____ City _____ State _____ Zip Code _____

Phone Number: (____) _____
 Home _____ Cell _____

E-Mail Address: _____

Would you like to receive information and Newsletters by E-Mail (Circle one) YES NO

JUNIORS: Children under the age of 18 that you are legally designated as parent, or guardian.
Children must be supervised by a parent or designated guardian at all functions and activities

(1) _____
 Juniors Name _____ Juniors Birth date _____ Horses' Name _____ Breed _____

(2) _____
 Juniors Name _____ Juniors Birth date _____ Horses' Name _____ Breed _____

Do you own horses or mules? YES NO (How Many) How many ride in your family _____

Type of Riding:
 Trail Riding _____ Western _____ English _____ Driving _____ Drill Team _____
 Roping _____ Dressage _____ Gymkhana _____ Cutting _____ Barrel Racing _____
 Team Penning _____ Pleasure _____ Endurance _____ Parades _____ Other _____

NOTE: If you or members of your family will be riding at our facilities, please complete the release of liability on the back of this form. The form and release of liability must be on file before utilizing the arena.

Volunteer: Volunteer help from our members supports our organization. Please check those areas you would like to help.
 [Thank you for your support]

Barrel Racing _____	Wild West Show & Rodeo _____	Family Round up _____	Pee Wee Rodeo _____
Horse Shows _____	Gymkhana _____	Team Penning _____	Roping _____
Arena Help _____	Work Days _____	Snack Shack _____	Committees _____
Tack Auction _____	Clean-up / Set up _____	Play Days _____	Phone Tree _____
Decorating _____	Club Dinners _____	Catering _____	Clinics / Seminars _____

Comments: _____

Sponsor: (New Member Only) _____ Approved: _____

RELEASE OF LIABILITY ON BACK MUST BE SIGNED

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Nevada County Horsemen, Inc. [NCHI]

Release of Liability Agreement

I am aware that participating in NCHI involves the risk of injury to my person, and property. I voluntarily accept all risk of personal injury (including permanent disability or death) and property damage arising from my attendance, and participation in NCHI.

As lawful consideration for being permitted to participate in NCHI, I hereby agree that I, my heir, personal representatives as assigns will not make a claim against, or sue NCHI, its officers, directors, members, employees, agents, invitees, or affiliated entities for any injury or damage from the negligence or other acts, however caused, of NCHI, their employees, officers, directors, members, agents, contractors, guests, invitees, etc.

In addition, I hereby release and discharge NCHI, Its officers, directors, members, employees, agents, contractors, guests, invitees, and affiliated entities from all actions, claims, or demands, including court costs and actual attorney's fees, that I, my heirs, personal representatives or assign now have or may hereafter have for personal injuries or property damage resulting from my participating in NCHI. I agree that this release includes injury to damage caused in whole or in part by negligence, active or passive, to the NCHI and its members, employees, landowners, agents and contracting parties.

I also expressly waive any rights I may have under California Civil Code Sec. 1542, which states, "A general release does not extend to claims which the creditor does not know or suspect to exist in his favor at the time of executing the release, which if known by him must have materially affected his settlement with the debtor."

I understand that it is the sole responsibility of the participant to carry full and complete insurance coverage of his/her horse or mule, personal property and him/herself. I acknowledge that I have been advised to wear protective headgear and hard-soled boots with a heel.

I represent and acknowledge that I currently have no ailments, physical or mental conditions or previously known physical or mental conditions that would or could be adversely affected by my participation in NCHI. I further represent that my horse or mule is free from contagious or transmittable disease or infection.

I HAVE CAREFULLY READ THIS AGREEMENT. I UNDERSTAND THAT IT IS A COMPLETE RELEASE OF ALL LIABILITY AND A PROMISE NOT TO SUE OR TO MAKE CLAIM AGAINST NCHI. I AM AWARE THAT IT IS A CONTRACT BETWEEN NCHI AND MYSELF.

Signature _____

Date _____

Signature _____

Date _____