

SCOTTSDALE SADDLE CLUB MEMBERSHIP APPLICATION

P.O. Box 71425 Phoenix, AZ 85050

SSC MEMBERSHIP GUIDELINES EFFECTIVE JANUARY 1, 2010

Annual membership is from January 1, 2010 through December 31, 2010.

_____ Individual Membership \$30.00
(Must be 18 years or older as of January 1, 2010)

_____ Family Membership \$40.00

First and Last Name: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell: _____

Other: _____

***E-mail:** _____

*Note: Your e-mail will not be shared or available to anyone. It is used so you may get updates on club events and monthly newsletters.

Adult Member Names (Ages 21+)

Participant: _____ DOB: _____

Participant: _____ DOB: _____

Participant: _____ DOB: _____

Children's Names (Under 21 years old)

Participant: _____ DOB: _____

Participant: _____ DOB: _____

Participant: _____ DOB: _____

Participant: _____ DOB: _____

Participant: _____ DOB: _____

I/my family interests are: (please check all that apply)

_____ Gymkhana _____ Junior/Senior Roping _____ Horse Shows _____ Clinics _____

_____ Drill Team _____ Parades _____ Other Interests: _____

Code of Conduct will be enforced at all times.

To qualify for year-end awards, each individual or any family member must meet the following requirements:

Gymkhanas: Volunteer a minimum of twelve (12) hours at gymkhanas.

Horse Shows: Volunteer a minimum of one hour per show per competitor.

Gymkhanas and Horse Shows are mutually exclusive from one another. If you want to qualify in both disciplines, you must have completed hours at both events. Official rules online at www.scottsdaleclub.com

I give permission to allow the persons named, to the left, to participate in Scottsdale Saddle Club (referred to from here on as SSC) activities and release the SSC, its officers, agents, assigns, City of Scottsdale, and its agents or affiliates of any liability for injury or damage incurred to myself, my family, my livestock, or equipment resulting from any SSC activity.

Name (Please Print) _____

Signature _____ Date _____

PARENTAL RELEASE FOR CHILD TO RIDE WITHOUT PARENT PRESENT

I, _____ give permission for my child/children named, to the left, to participate in any SSC activities in my absence for the period of January 1, 2010 through December 31, 2010. If at anytime I want this reversed, I will notify the SSC in writing.

Signature _____ Date _____

For Official Use Only:

Check # _____ Check Amount _____ Cash Amount _____

NEW MEMBERSHIP _____ RENEWAL _____

Date _____