

Rockingham Riding Club, Inc.
Membership Application for April 2018 - March 2019

Please **PRINT** information

Name _____ DATE: _____

Mailing Address _____

City _____ State _____ ZIP _____

Phone# _____ Cell# _____

Email: _____ **please print clearly**

Membership Dues-Term expires March 2019 () \$35.00 Family (2 or more in same family) () \$20.00 Individual

Half price rate for new members joining after October 1st, membership expires March 2019

All family members must sign this form to participate in any RRC rides or activities.

*All riders under the age of 18 must have form signed by Parent or Guardian.

Make Checks Payable to: Rockingham Riding Club

Total \$ Enclosed: _____

MAIL check & application to:

Peter Coronis

RRC Treasurer

5 Chester Road

Raymond, NH 03077

Office Use only

Date Received: _____

Check ()

Cash ()

Please state how you would like to be listed in the RRC Directory

This information will be distributed to all members

- Please include my name, phone and e-mail address in publication
- Please include my name only c/o RRC address. All correspondence will be routed through the editor.
- I wish to remain unlisted

WAIVER OF LIABILITY

Every entry at a recognized trail ride/event shall constitute an agreement that the person making it and the horse shall be subject to the constitution and the rules of the RRC and the local rules of the ride. It shall further constitute that every horse and rider is eligible as entered, and that the owner and his/her representatives are bound by the constitution and rules of the RRC and the event and accept as final the decision of the Hearing Committee on any question arising under said rules and agree to hold the ride, RRC, their officials and directors for any action taken.

I, my part, and my heirs, further agree that if any damage be occasioned, injury or loss to the horse exhibited, or to any vehicle or other article that I may send with such horse, that I will make no claims now and forever thereafter further agree to indemnify, forever, the ride, the committee, RRC, Inc., any property owners and any participants in the event against all claims, demands, suits and expenses arising out of any injury, loss or damage to any person or damage, loss or injury to any property or person caused by myself, my horse, my attendants or vehicle.

*In case of injury to a minor at an RRC activity or ride, I authorize RRC of their agents to secure whatever emergency medical treatment needed for my minor child entered in the event with no liability whatsoever to the RRC, property owner or anyone involved in the activity or ride.

***Parent/Guardian Signature** _____

All Members please sign and date below:

