

# 2017 Membership Application

PLEASE PRINT LEGIBLY

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

If family membership, please complete the following:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

**Individual Membership Dues (must be 18 years old or older): \$35.00**

**Family Membership Dues: \$ 60.00**

- Membership must include at least one parent/guardian (living in the same household) of included minor child(ren).
- Children ages 18 to 22 may be included in a Family Membership IF they are a full-time student and the family residence is their primary residence.
- Application MUST be signed by a parent or guardian of minor child(ren).
- Each member is required to abide by the by-laws and rules set forth by Keller Saddle Club.
- Membership is valid for one calendar year and must be renewed on an annual basis.
- Membership is not complete unless application is accompanied by annual membership dues.

## WARNING

UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE),  
AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF  
A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM  
THE INHERENT RISKS OF EQUINE ACTIVITIES

I, the undersigned, agree that I do not hold the Keller Saddle Club, Inc., and/or any member thereof liable for any accident or injury, be it personal or physical to me, any member of my family and/or property. It is understood that I and/or any member of my family who takes part in any of the club or association activities does so at their own risk.

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

KSC Use Only:

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_ CASH/CHECK # \_\_\_\_\_ Amount: \_\_\_\_\_