**HCVSC Membership Form &**

**Liability Release and Express Assumption of Risk for**

**All Club Activities of Hay Creek Valley Saddle Club**

**Please Read Carefully & Fill in All Blanks Before Signing--Each Member Must Complete and Sign This Waiver**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (print your name), by this instrument, do hereby release and forever discharge Hay Creek Valley Saddle Club (the "Club"), its officers, members, agents, operators, sponsors, successors and assigns (collectively the "Released Parties") from any and all liability and responsibility for personal injury, property damage, or wrongful death however caused, including but not limited to product liability or the negligence of any of the Released Parties, whether passive or active, arising from or relating to any Club activity or event in which I or my guest or friend participate.

I hereby personally assume all risks in connection with participating in club activities, and I understand and agree that none of the Released Parties may be held liable or responsible in any way for any occurrence on or at any Club-related or sponsored trail ride, Club meeting or function, or any Club-related activity or event, which may result in harm, personal injury, property damage, wrongful death or other damage to me or my family, heirs, or assigns that may occur as a result of participation by myself, my guest or my friend in such Club activity or as the result of the negligence of any party, including the Released Parties, whether passive or active. I agree not to sue or make a claim against the Released Parties' negligence relating to or in conjunction with the Club activities and in the event I shall prosecute any such claim, then I shall indemnify and hold the Released Parties harmless from any loss or liability there from, including costs and legal fees.

Prior to participating in any Club-related activities, I acknowledge that if I choose to participate in Club-related activities, that I alone am responsible for my own activities and that I cannot rely upon anyone to advise me of my own improper or unsafe procedures and practices participating on trail rides, etc.

I understand that although from time to time the Club, its officers, and its members may facilitate events and associations among its members, guests and friends for the purpose of recreational riding, neither the Club, its officers or its members may make any representation as to safety of horses, equipment, nor as to the skill, experience, training or standard of care of any member of the Club. Nor does the Club, its officers or members make any representation that any member of the Club who rides their horse (s) and invites other members of the Club, their guests or friends to a Club sponsored activity (such as a trail ride), maintains any standard of liability insurance or otherwise possesses I expressly assume all risk for, and will not hold the Released Parties responsible for, any injuries that may befall me in conjunction with such activities, whether foreseen or unforeseen, whether or not occurring as a result of the negligence of the Club, its officers or members.

**I ACKNOWLEDGE THAT I HAVE FULLY READ AND CONSIDERED ALL OF THE TERMS AND STATEMENTS CONTAINED IN THIS RELEASE, FULLY UNDERSTAND THE POTENTIAL DANGERS OF TRAIL RIDING AND AM FULLY AWARE OF THE LEGAL CONSEQUENCES OF SIGNING THIS INSTRUMENT, AND THAT I UNDERSTAND AND AGREE THAT THE TERMS OF THIS DOCUMENT ARE CONTRACTUAL AND LEGALLY BINDING AND WILL PRECLUDE ME, MY HEIRS, SUCCESSORS, EXECUTORS OR ASSIGNS FROM RECOVERING MONETARY DAMAGES FROM THE ABOVE-LISTED ENTITIES AND/OR INDIVIDUALS, WHETHER SPECIFICALLY NAMED OR NOT, FOR PERSONAL INJURY, PROPERTY DAMAGE OR WRONGFUL DEATH CAUSED BY NEGLIGENCE OR PRODUCT LIABILITY. THIS DOCUMENT SHALL REMAIN IN FULL LEGAL FORCE AND EFFECT UNTIL REVOKED BY ME IN WRITING. I FURTHER STATE THAT I AM OF LAWFUL AGE AND LEGALLY COMPETENT TO SIGN THIS LIABILITY RELEASE AND EXPRESS ASSUMPTION OF RISK.**

Executed this \_\_\_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_\_\_\_\_\_

Signed (Adult, Parent or Guardian Signature) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_ Telephone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The information below is necessary to be included on WSCA membership lists.

Adult’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan 1\_\_\_\_\_\_\_

Adult’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan. 1\_\_\_\_\_\_\_

Minor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan. 1\_\_\_\_\_\_\_

Minor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan. 1\_\_\_\_\_\_\_

Minor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan. 1\_\_\_\_\_\_\_

Minor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan. 1\_\_\_\_\_\_\_

Minor’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age as of Jan. 1\_\_\_\_\_\_\_

Please refer to the HCVSC Bylaws which are posted on our website for information on membership. **Article IV, Section 3 & 4. 2015 Membership Dues: Family ($25) Single ($20)**

Bring your completed membership form to our next meeting or mail to: Kristina Novek, W4898 125th Ave., Bay City, WI 54723