



# Hood River Saddle Club

4384 Belmont Drive

Mailing Address: P.O. Box 154

Hood River, OR 97031

Email: hrsc@hoodriversaddleclub.org

Website: www.hoodriversaddleclub.org

Facebook: www.facebook.com/HoodRiverSaddleClub

## Membership Application - 2023

Rate increases to \$75  
March 1st!

To join the Hood River Saddle Club, please complete this application and sign the liability release.

Return this form, with your \$50 membership dues (payable to Hood River Saddle Club) to the mailing address above or bring to a club meeting (held Feb - Dec, first Tuesday).

**A new application is required from all members each year.**

*(Memberships received Sept through Dec will remain in effect for the following year.)*

Adults' Name(s) \_\_\_\_\_  
(First) (Last) (First) (Last)

Mailing Address \_\_\_\_\_  
(Street Address/P.O. Box) (City) (State) (ZIP)

Adults' Phone #s \_\_\_\_\_

Adults' Emails \_\_\_\_\_

*(Most HRSC communication is by email. Thanks for providing both adults' email addresses.)*

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Child's Name \_\_\_\_\_ Age \_\_\_\_\_

## Hood River Saddle Club Release of Liability

**All ADULT members (18 and over) MUST sign. Adult's signature covers minor children.**

**THIS RELEASE WAIVES IMPORTANT LEGAL RIGHTS. PLEASE READ CAREFULLY BEFORE SIGNING.**

Recognizing there is the potential for an accident wherever horse use is involved, which can cause injuries to horses, riders and spectators, and also recognizing that the Hood River Saddle Club (HRSC), including officers, directors or members, cannot always know the condition of riding surfaces or the experience levels of riders or horses using the HRSC, I do hereby release and hold harmless the above named from any claim or right for damages which might occur to me, my minor children or horses while on HRSC grounds or participating in any HRSC function.

By signing below, I further agree to be bound by all Hood River Saddle Club rules, regulations and bylaws.

\_\_\_\_\_  
(Adult Signature) (Date) (Adult Signature) (Date)

### **OFFICE USE ONLY**

Received Date: \_\_\_\_\_

Membership List  Email List

Amount: \$ \_\_\_\_\_  Cash  Check # \_\_\_\_\_