



www.sdhpa.com

2010 MEMBERSHIP FORM AND RELEASE

Due April 1st 2010

Riding Arena is located at 116 Hosner Mtn. Road, Hopewell Jct, NY

Members are entitled to use arena on non-event days, receive discounts on show entry fees and vote on issues raised at monthly meetings. Members agree to abide by terms and conditions. Any and all assistance members can provide is always greatly appreciated.

Individual \$25

Family \$35 (includes children under 21 residing in the same household)

Membership – select one \$ _____

Lamination Fee (optional) – add \$1 \$ _____

Tax Deductible Donation (optional, but greatly appreciated) \$ _____

SDHPA Inc is a 501(c)(3) organization. Contributions are tax deductible to the extent permitted by law.

Total \$ _____

Primary Member Name: _____

Additional Family Member Names: _____

Address: _____

City, State Zip: _____

Phone: _____ Email: _____

____ I am interested in volunteering. Please contact me.

Please make checks payable to:

SDHPA

PO Box 235

Hopewell Jct, NY 12533

Notes: *You must be an SDHPA member meeting all requirements to qualify for year-end awards.* See Show Chair or SDHPA policies and procedures for further information. * All horses must have a current Rabies vaccine and a current Coggins test result. * Please sign the release on the back of this form.

THANK YOU FOR YOUR SUPPORT OF SDHPA



HORSEBACK RIDING RELEASE

I, the undersigned, acknowledge that there is an inherent risk in equine activities, that there are dangers and risks which are an integral part of equine activities including but not limited to:

The propensity of equines to behave in ways that may result in injury, harm or death to persons on or around them.

The unpredictability of an equine's reaction to such things as unfamiliar sounds, objects, persons, animals or sudden movement.

Hazards, such as surface and subsurface conditions, and collisions with other equines or objects.

The potential of a participant to act in a negligent manner that may contribute to injury to the participant or others, such as failing to maintain control over the animal or not acting within his or her ability.

I, therefore, assume complete responsibility for any injury or accident incurred while a participant in any horse-related event or trail riding. I further assert that Southern Dutchess Horse and Pony Association, Inc. and Elton W. Bailey Jr., owner of said leased property by SDHPA, shall not be liable for any injury or death incurred resulting from the inherent risk of horseback riding. Neither I, nor my representatives, assignees, or heirs shall make any claims against, maintain any action against, or recover any loss, damage or death of the participant resulting in the inherent risk of an equine event or trail riding.

I acknowledge that I have read, understand and agree to the statement.

Signed: _____ Date: _____

In the event the participant is a minor, the legal guardian must sign below.

I, the legal guardian of the above-named minor(s), assert that I have read and understand the above information and the risk associated with horseback riding.

Signed: _____ Date: _____