



2018 Membership / Release Form

Date: _____

Name(s)*: _____

Address: _____

Phone: _____

Family (\$25): _____ **Individual (\$10):** _____

Email: _____

Shows: _____ **Trail Rides:** _____

WARNING:

Under Alabama law, an equine activity sponsor or 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, pursuant to the Equine Activities Liability Protection Act.

The undersigned named below hereby agrees to forever hold the Alexander City Horse Riding Club, its officers, and members harmless from any injuries or damages which may be suffered by themselves or any minor participant of whom they are a parent, guardian or responsible party, as a result of their participation, either directly or indirectly in any activity sponsored by the Alexander City Horse Riding Club; and further, the undersigned indemnifies Alexander City Horse Riding Club, its officers, and members from all and any claims, actions, causes or other remedies of law or otherwise whatsoever may result from any injuries or damages suffered by said participants. The undersigned further agrees that they are responsible under all conditions stated herein for any minor guest brought by them to any Alexander City Horse Riding Club activity.

Signature: _____

Date: _____

Mail to**:
ACHRC
P. O. Box 1433
Alexander City, AL 35011

*For family memberships, please list children's ages with their names so that they'll be placed in the correct award category.

**If mailed, membership will begin as of the postmark date.