

# **BUXMONT RIDING CLUB NEW MEMBER APPLICATION**

**PLEASE PRINT CLEARLY**

Last Name \_\_\_\_\_ Date of Application \_\_\_\_\_

First Name \_\_\_\_\_ Spouse's Name \_\_\_\_\_

Child/Children's First and Last Name(s) Age Date of birth (for ages 17 & under)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

House Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

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

Number of horses/ponies in your family \_\_\_\_\_ Type of horses/ponies: \_\_\_\_\_

What is your interest in the Buxmont Riding Club? \_\_\_\_\_

\_\_\_\_\_

Do you belong to any other Clubs, if yes, which ones? \_\_\_\_\_

\_\_\_\_\_

How/Where did you hear about the Buxmont Riding Club? \_\_\_\_\_

\_\_\_\_\_

The Buxmont Riding Club depends on VOLUNTEERISM. In order to match your interest and skills with the functions needed to maintain the club, PLEASE rate the following as to what you can be involved in: 0 - Cannot do, 1 - Will try to help, 2 - Will help

_____ Banquet	_____ Gate help – W G H J M	_____ Show Booth
_____ Building/Grounds upkeep	_____ Gymkhana Show Help	_____ Set up Trail Rides
_____ Jumper Show Help	_____ Points Keeper – W H J M	_____ Western Show Help
_____ Hunter Show Help	_____ Workshops/Clinics setup	_____ Mini Show help
_____ Food Booth – W G E J M	_____ Ring Master W H M	_____ Fundraising

Which show(s) do you and/or your family members participate in?

Western      Gymkhana      English      Jumpers      Mini

Please circle the membership you are signing up for: \*\*\*\*All minors under 18 must join with at least 1 parent in a dual or family membership\*\*\*\*

Single - \$35 - An individual that is 18yrs or older

Dual - \$40 - 2 people, at least 1 of whom is 18yrs or older, and both live under the same roof

Family - \$50 - 3 or more people, at least 1 of whom is 18yrs or older, & live under the same roof

Make checks payable to Buxmont Riding Club.

Please mail your check along with this application to:

Buxmont Riding Club, Attn: Membership, PO Box 113, Tylersport, PA 18971-0113

**BUXMONT RIDING CLUB RELEASE OF LIABILITY**

The Buxmont Riding Club, its owners, and its agents will not be responsible for any accidents; property damage, loss or theft incurred on the club grounds. The member(s) shall hold Buxmont Riding Club harmless and indemnify them against any legal proceedings arising from any accident or damages. Your signature on this form will release the Buxmont Riding Club and its owners of all said responsibilities.

I, the undersigned (owner and rider - if different, parent/guardian - if owner or rider is 17 years of age or under) knowingly and voluntarily agree:

1. To assume total legal responsibility and hold harmless the Buxmont Riding Club, its owners; its agents and club management for any bodily injury or property damage sustained by me and/or my horse, equipment or rider on the club grounds or in the club rings.
2. To release the Buxmont Riding Club, its owners, its agents and club management of any legal responsibilities and to hold harmless the aforementioned for any bodily injury or property damage sustained by me/or my horse, equipment, or rider on Buxmont Riding Club property.

**ALL RIDERS MUST WEAR A SHOE WITH A HEEL.**

**Riders 17 years and under, as of 1/1/22, must wear an approved helmet while mounted on the club grounds.**

**By signing this form, I agree to abide by all the Rules and Regulations set forth by the Buxmont Riding Club.**

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**Signature of Member (18 & over) Date**

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**Signature of Member (18 & over) Date**

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**Signature of Parent/Guardian if 17 and under Date**

**Membership Coordinator ONLY below this point**

Check Number: _____	Date received: _____	Amount received \$ _____
Cash: _____	Received by: _____	