

2023 PARTICIPATING MEMBER APPLICATION

1. This application must be <u>COMPLETE</u> with all <u>REQUIRED SIGNATURES</u>, <u>NO PHOTOCOPIES</u> and <u>RECEIVED BY THE NATIONAL OFFICE WITH ALL REQUISITE FEES BY APPROPRIATE PAYMENT METHOD BEFORE THIS APPLICANT MAY PARTICIPATE IN ANY UNITED STATES PONY CLUBS, INC. ("USPC") ACTIVITY. 2. Any application returned as <u>INCOMPLETE</u>, or with INVALID SIGNATURES must be resubmitted and is subject to a \$5.00 RETURN FEE.</u>

This box to be Completed by Club/Center Official:	*NOTE: USPC MEMBERSHIP DUES ARE NON-REFUNDABLE*			
Club/Center Name	Please check all that apply; <u>FEES ARE FOR NATIONAL DUES ONLY</u> .			
Region Name	□ \$155 New Member for 2023.	\$135 Early Renewal Member for 2023, discount if postmarked or paid on or		
Previous Club/Center (if transferring)	\$145 Regular Renewal for 2023,	before 11/15/22. Transfer No charge if current member.		
Certification (if renewing)	postmarked or paid after 11/15/22.	If not current, the member must select		
	☐ \$200 Prorated New Member joining	a renewal option. \$\square\$ \$180 Prorated Renewal rejoining		
Submitted by MUST BE DC/CA OR APPOINTEE, UNLESS NATIONAL MEMBER Submitter Phone/E-mail	between 09/01/22 and 12/31/22 for the remainder of 2022 & all of 2023.	between 09/01/22 and 12/31/22 for the remainder of 2022 & all of 2023.		
MEMBER INFORMATION To be completed by Applicant or Parent/Legal Guardian:		ist be at least 18 yrs & have achieved a C-2 HM mendation required from DC, CA or RS.)		
Gender □ M □ F Birth Date MM/DD/YYYY	Join Date (Unless Renewing)			
Name	ı	1		
LAST+SUFFIX (IF APPLICABLE) FIRST	MIDDLE	PREFERRED (IF DIFFERENT FROM FIRST)		
Mailing Address	ı			
P.O. BOX/STREET	CITY	STATE ZIP + 4 (IF KNOWN)		
Phone №s	<u>E-mail</u>			
	🗆 aqha 🗆 ffa 🗅 4-h 🗅 iea 🗅 apa 🗅 wdaa 🕻	☐Other Nat'l Orgs.		
MEMBER#	I	ı		
USPC ALUMNI please provide the following information GRA	DUATE CLUB/CENTER CERTIFICATION CERTIFICATIO	TION MAIDEN NAME		
	NT/LEGAL GUARDIAN*	SPOUSE EMERGENCY CONTACT		
Name	1	USPC Alumnus?		
PRIM. LAST+SUFFIX (IF APPLICABLE) FIRST	MIDDLE	CHECK TO INDICATE YES		
Phone №s	<u>E-mail</u>			
MOBILE WORK				
Name ADDL. LAST+SUFFIX (IF APPLICABLE) FIRST	 MIDDLE	USPC Alumnus?		
ADDL. LAST+SUFFIX (IF APPLICABLE) FIRST Phone №s	E-mail	CHECK TO INDICATE YES		
MOBILE WORK	<u>L-man</u>			
☐ MAILING ADDRESS OPT OUT I acknowledge that USPC may distribute adult To deny consent for the release of adult mailing address, indicate by checking PARTICIPATING MEMBER CODE OF CONDUCT The United States Pony Clubs, Inc. is proud of its reputation for good sporappropriate behavior from all members, parents and others participat possession, use or distribution of any illegal drugs or alcohol; profanity, threaten or persecute others before, during or following USPC activities); I understand that my membership and participation is under the governar I understand that I have access to these By-Laws, Policies, Rules and Regany Riding Center Facility or Business. Acceptance of this application is	the box. ortsmanship, horsemanship, teamwork and ing in any USPC activity. Inappropriate by vulgar language or gestures; harassment failure to follow rules; cheating; and abusing of USPC and is subject to all applicable Ugulations, and that it is my responsibility to	well-behaved members. The USPC expects ehavior may include, but is not limited to: (i.e., using words or actions that intimidate, ng a horse. SPC By-Laws, Policies, Rules and Regulations. read them. USPC does not own or operate		
may be denied or revoked at any time, with or without cause. Should my no refund of USPC membership dues. PHOTOGRAPH/VIDEOTAPE/E-MAIL RELEASE				
Participation in any USPC activity constitutes a release to be photograph or broadcast at the discretion of USPC. USPC utilizes e-mail to communic this form of correspondence is implied.	ate with members, by submitting an e-mail			
RELEASE, ASSUMPTION OF RISK, WAIVER OF LIABILITY, AND INDEMNITY Acceptance of Member Application by USPC is contingent on USPC's rece Agreement with a valid signature by the applicant/applicant's parent/leg until the signed Release, Assumption of Risk, Waiver of Liability, the applicant/parent/legal guardian confirms that the Release, Assumpt submitted, and that all terms therein have been understood and accepted Assumption of Risk, Waiver of Liability, and Indemnity Agreement will be through any of its local, regional, or national operations, and that such centers or regions, and applies regardless of the type of membership the	ript of an original signed Release, Assumptical guardian. It is understood that the applicant Indemnity Agreement is received. It is understood that the applicant of Risk, Waiver of Liability, and Indemnited. The applicant/parent/legal guardian also evalid and enforceable for the entire dura agreement survives any renewal, lapse in applicant receives.	icant cannot participate in any USPC activity By submitting this Member Application, nity Agreement has been validly signed and so understands and agrees that the Release, tion of the applicant's participation in USPC membership and/or transfer to other clubs,		
I have read and agree to abide by the above. Signa		als, not photocopies.		
ORIGINAL SIGNATURE OF USPC MEMBER APPLICANT REQUIRED IF APPLICANT IS OF OR GREATER THAN THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE.	OR ORIGINAL SIGNATURE OF APPLICANT'S PAI REQUIRED IF APPLICANT IS UNDER THE AGE	RENT OR LEGAL GUARDIAN MM/DD/YYYY OF MAJORITY IN THEIR STATE OF RESIDENCE.		

THE UNITED STATES PONY CLUBS, INC. RELEASE, ASSUMPTION OF RISK, WAIVER OF LIABILITY, AND INDEMNITY AGREEMENT

This document waives important legal rights. Read it carefully before signing.

I **AGREE** for myself, and/or my child, my/our administrators and assigns, in consideration for my, and/or my child's, participation in this United States Pony Clubs, Inc. (USPC) activity to the following:

I AGREE that I choose to participate voluntarily in an equestrian activity, as a rider, driver, handler, lessee, owner, agent, spectator, volunteer, and/or trainer. I am fully aware and acknowledge that horse sports and USPC activities involve inherent dangerous risks of accident, loss, and serious bodily injury including, but not limited to, broken bones, head injuries, trauma, pain, sickness and disease (including communicable diseases), suffering or death ("Harm"). I fully understand that this release covers, but is not limited to, inherent risks of an equine activity which mean a danger or condition that is an integral part of an equine activity, including but not limited to, any of the following:

- > The propensity of an equine to behave in ways that may result in injury, death, or loss to persons on or around the equine;
- > The unpredictability of an equine's reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals;
- > Hazards, including, but not limited to, surface or subsurface conditions;
- A collision with another equine, another animal, a person, or an object;
- > The potential of an individual during an equine activity to act in a negligent manner that may contribute to injury, death, or loss to the person of the participant or to other persons, including but not limited to, failing to maintain control over an equine or failing to act within the ability of the participant.

I AGREE that, because of the inherent dangerous risks associated with equestrian activity, I will complete a medical wristband or armband card and that I and/or my child will wear it while participating in USPC activities. I authorize USPC, it successors or assigns, officials, officers, directors, employees, agents and/or volunteers to obtain and release to any USPC activity personnel (including, but not limited to, organizers, instructors, test examiners, chaperones), and to any first aid and safety personnel, medical professional, and treating medical facility, any information regarding my/my child's medical history, symptoms, treatment, exam results and/or diagnosis contained in the wristband or armband card. I acknowledge that it is my/parental/legal guardian responsibility to ensure that I am/my child is a USPC participating member and am/is wearing a completed wristband or armband card at all USPC activities. Furthermore, I agree and understand that it is my/parental/legal guardian responsibility to ensure that I/my child will not participate in any USPC mounted activities if I/my child have/has had a head injury or other medical condition and have/has been restricted from activity, until such time as the injury or condition is resolved and any activity restriction is lifted.

I AGREE to release the USPC, its successors or assigns, officials, officers, directors, employees, agents, personnel, volunteers and affiliated organizations from all claims including, but not limited to, claims for money or property, disability, covenants, actions, suits, causes or action, obligations, debts, costs, expenses, attorneys' fees, judgments, orders and liabilities of whatsoever kind or nature in law, equity or otherwise, whether now known or unknown, suspected or unsuspected, and whether concealed or hidden, including but not limited to any state or federal statutory or common law claim or remedy of any kind whatsoever arising out of or in any way connected with any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted, directly or indirectly, from the negligence of the USPC or the USPC activity.

I AGREE to expressly assume all risks of Harm to me or my horse, including Harm resulting from the negligence of the USPC or the USPC activity, and specifically agree to the applicable state statute/law regarding equine/farm animal activity liability and signed posting (if any), in any state in which I or my child participates in a USPC activity. While a list of state statutes and select portions of those statutes believed to be in effect at the time of the execution of this agreement is attached hereto, I AGREE to locate, review and understand the full applicable statute in place in my jurisdiction.

I AGREE to indemnify (that is, to pay any losses, damages, or costs incurred by) the USPC and the USPC activity and to hold them harmless with respect to claims for Harm to me or my horse, and for claims made by others for any Harm caused by me or my horse in the USPC activity.

I AGREE that neither I, nor any one claiming through me, will hereafter bring, commence, prosecute or maintain, or cause or permit to be brought, commenced, prosecuted or maintained, any suit or action, either at law or in equity, in any court in the United States or in any state thereof, or elsewhere, against the USPC, its successors or assigns, for, on account of, arising out of, or in any way connected with any Harm to me or my horse, and that neither I, nor any one claiming though me, will enforce, prosecute, or recover upon, or attempt to enforce, prosecute, or recover upon, any claim or right of action whatsoever, which I, or any one claiming though me, may now have or hereafter assert, in any way connected with claims for Harm to me or my horse, and for claims made by others for any Harms caused by me or my horse at the USPC activity.

I AGREE this Agreement is ongoing, and shall apply for the total duration of my/my child's membership in USPC, and that this Agreement survives any and all membership renewal, transfer, change of any kind, and/or lapse of membership. I specifically acknowledge that the ongoing nature of this Agreement makes it unnecessary for me to execute any release in the future, as this Agreement applies and releases all the liability and costs, as agreed to above, that might be covered by such a future agreement.

I **AGREE** this Agreement is the entire agreement of the parties, and supersedes all prior oral and written understandings and agreements. This Agreement may be modified only by a written amendment signed by both parties. An official electronic communication whereby the member and/or parent/guardian is asked to "click" to agree to a new term or condition shall satisfy this section.

I AGREE that if any provision of the Agreement is found to be invalid or illegal by a court of competent jurisdiction, the remaining provisions shall be construed as if the affected provision had not been included in order to effectuate the intent of the parties.

In the event this form is signed by the parent/guardian of a minor, then all representations and acknowledgements herein are expressly made by, for, and on behalf of the parent/guardian and minor. It is agreed that, once a minor reaches the age of majority, he/she will submit and sign a new Member Application. Parent/guardian agrees to indemnify USPC from any harm or damages related to the failure to submit this new application.

By signing below, I **AGREE** to be bound by all applicable USPC rules and all terms and provisions of the USPC activity. I acknowledge that I enter into this release after having read the same, and place my signature hereto of my own free voluntary act and deed. By signing below, I represent to the USPC that I fully understand its contents, that I do not need any further explanation, and I waive any further explanation.

I AGREE that by altering this form in any way this application for membership will be considered null and void by USPC.

I have read and AGREE to abide by the above. REQUIRED, all signatures must be originals, not photocopies.

		OR		
DRIGINAL SIGNATURE OF USPC MEMBER APPLICANT	MM/DD/YYYY	-	ORIGINAL SIGNATURE OF APPLICANT'S PARENT OR LEGAL GUARDIAN	MM/DD/YYYY
QUIRED IF APPLICANT IS OF OR GREATER THAN THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE		REQUIRED IF APPLICANT IS UNDER THE AGE OF MAJORITY IN THEIR STATE OF RESIDENCE		