



MEMBERSHIP APPLICATION
WILL COUNTY TRAIL RIDERS
1-1 TO 12-31 OF CURRENT YEAR



_____ NEW MEMBER _____ RENEWAL

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE NUMBERS: HOME: _____ CELL: _____

PLEASE SELECT / CHECK MARK ONE OF THE FOLLOWING BOXES;

Check this box if you want to receive the newsletter via email.

Email address: _____

Check this box if you want to receive the newsletter via regular USPS mail
(Note; This option will require an additional \$6 fee to your membership to cover postage)

Check this box if you do not want to receive the newsletter

Membership: _____ Individual \$15.00

_____ Family \$18.00 Number of Family members: _____

In signing below I agree to be bound by the terms of the By-Laws of Will County Trail Riders and the Release below which I have read and understood.

Member signature(s): _____

Date: _____

Release

I, the undersigned, as a member of Will County Trail Riders ("WCTR"), by signing this application and Release am waiving any and all claims that I have now or may have in the future against WCTR and/or its members or guests for damages to my property or for the death or personal injuries of myself or my child arising from events or activities that I attend which are promoted or sponsored by WCTR. In signing this Release I acknowledge that activities dealing with horses can be dangerous since horses are unpredictable animals and capable of causing serious damage and/or injury; by signing I am assuming and waiving those risks for myself and my child as it relates to WCTR events. By signing this Release, I waive and hold WCTR, its members or guests harmless from any claim that I or my child may have due to the consumption or manner of handling of any goods or beverages at WCTR promoted or sponsored events. I hereby waive the right to make a claim against the premises owner where WCTR equine events are held, WCTR and/or its members or guests for myself or my child for death or injuries that could have been minimized or avoided by the use of a helmet. I will indemnify and hold harmless the premises owner where the event takes place, WCTR and its members and/or guests for any damage, death, or injury occurring to others as a result of my conduct or the conduct of minor children in my care at any event held or promoted by WCTR.

WARNING: Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss, or damage to person or property resulting from the risk of equine activities. "Risks of engaging in equine activities" means those dangers of conditions that are an integral part of equine activities, including, but not limited to: (1) The propensity of an equine to behave in ways that may result in injury, harm, or death to persons on or around them. (2) The unpredictability of an equine's reaction to sounds, sudden movement, and unfamiliar objects, persons, other animals, or other things. (3) Certain hazards such as surface and subsurface conditions. (4) Collisions with other equines or objects. (5) 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.

NOTE: All members must carry their own Accident Medical Insurance and their own Personal Liability Insurance. The club's liability policy does not insure members for bodily injury and property damage they incur. The club's liability policy insures the club for its liability; it does not insure members for personal liability losses for which they are personally responsible.