

DOG RIVER HORSE CLUB ~ 2019 MEMBERSHIP FORM & Waiver/Release (Jan 1 to Dec 31)

Mail to:

Annette Deberville, (Membership Management)

95 Plumb LN

Washington, VT 05675

Single \$15 ___ Family \$20 ___

(family includes those children in home **under 18**)

Renewal ___ New ___

Make checks payable to: DRHC

Name: _____

Address: _____

_____ zip _____

Phone: _____ Email: _____

Would you like to receive your newsletter by email? Yes ___ or No ___

RELEASE

The following Release is for DRHC events and covers members' use of DRHC's Arena in the Town of Washington at times when it is not otherwise in use - on a first come/first serve basis - must share with others - must pick up after yourself

Release: I/we understand that under Vermont Law, an equine activity sponsor, such as Dog River Horse Club, is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities that are obvious and necessary, pursuant to 12 V.S.A. §1039. I understand that the sport of horseback riding and driving is inherently dangerous and that serious injury and death can occur. I understand that participation in equine activities involves necessary risks.

I/We agree that if any injury occurs to my horse or myself or to any equipment that I may use or provide for use on the ground or in an activity, I will make no claim against any of the Officers, Directors, Trustees, Employees and Volunteers of the Dog River Horse Club or the Town of Washington, Vermont.

I/We further agree to hold the Dog River Horse Club, Town of Washington, Vermont, their Officers, Directors, Trustees, Employees, Volunteers and Landowners free and harmless from any liability, claims, suits or damages of whatsoever kind or nature that may be occasioned by the horses used by me, or the negligence of the other participants, their horses, bystanders, club members, or others associated with equine activities, and I agree to indemnify and hold harmless the above listed Dog River Horse Club and Town of Washington, Vermont, and individuals against all liability claims, suits, and expenses including attorney fees incurred arising out of any injury to any person or damage to any property caused by me, my horses, my guests or attendants.

Helmet release: I/We acknowledge that wearing a properly fitted and secured helmet while riding or driving, mounting, dismounting and being near horses may reduce the severity of head injuries or prevent death occurring as the result of a fall or other occurrence. I assume all helmet related risks, including but not limited to the risk of injury if I do not wear such a helmet. (Helmet **REQUIRED** for anyone under 18 years of age for the above-listed activities).

PRINTED NAME OF ALL MEMBER(S) (List Age of Children under 18) _____

Signature of all member(s) (or parent if under 18): _____

FOR CLUB USE: Membership Received / / Check No. _____ (member responsible for all fees on returned checks)

Signature Required for Insurance Purposes

If not signed, this will be returned to you