



## 2017 Membership Application Form

(Valid through 12/31/2017)

**2017 Membership Types and Dues:** \_\_\_\_\_ New \_\_\_\_\_ Renewal

**Annual Dues: Individual \$25 or Family \$35 =** \$ \_\_\_\_\_

Last Name:		First:		Cell Phone:	
Spouse Last:		First:		Cell Phone:	
Dependent Last Name:		First:		Cell Phone:	
Dependent Last Name:		First:		Cell Phone:	
Dependent Last Name:		First:		Cell Phone:	

*(Copy this form to add additional dependents to this application)*

Address:			
City/State/Zip			
Home Phone:		Email:	
Emergency Contact:		Contact Phone:	

**2017 Trail Tag Purchase (optional): Individual Trail Tag: \$35 / Family Trail Tag: \$70 =** \$ \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Cell # \_\_\_\_\_

I have read and will abide by "The Rules" for riding at BRCEs located on the U.S. Trail Ride website located at: <http://www.ustrailride.org/BRCEsRules.html>. *Signature(s) required below.*

Signature _____	Date _____
Signature _____	Date _____
Signature _____	Date _____
Signature _____	Date _____

Have all adult riders attended a BRCEs Orientation Ride?      No       Yes

*Blue Ridge Center for Environmental Stewardship in Neersville, VA Trail tag fees are used to maintain the trails and to support BRCEs operations.*

I acknowledge I must bring a copy of my current negative coggins for each horse attending any USTR event.

Optional Tax Deductible Donation to Blue Ridge  
Center for Environmental Stewardship [BRCEs] \$ \_\_\_\_\_  
Total membership fees: \$ \_\_\_\_\_  
Total trail tag fees:    + \$ \_\_\_\_\_  
Check Total:                    \$ \_\_\_\_\_

A separate signed liability waiver for each member is enclosed.

*Please print and send with this form. Each member named on this membership application MUST return a signed liability waiver. LIABILITY WAIVERS FOR DEPENDENTS UNDER AGE 18 MUST BE SIGNED BY BOTH PARENTS, IF APPLICABLE, OR LEGAL GUARDIAN(S). See [www.ustrailride.org/downloads/USTRRRelease.pdf](http://www.ustrailride.org/downloads/USTRRRelease.pdf) for a copy of waiver.*

Sign & Mail this form along with signed waivers for each member. Send Total membership/trail tag fees payable to USTR to: **USTR c/o Justine Gettman, 11312 Dutchman's Creek Road, Lovettsville, VA 20180**

RELEASE, WAIVER AND INDEMNITY AGREEMENT

The undersigned (hereinafter referred to as "Rider"), being of legal age or signing in conjunction with a parent or legal guardian if not of legal age, desires to participate in cross-country horseback riding, competitive trail riding OR other related equine activities with United States Trail Ride, Inc., ("USTR"), and being fully aware of the risk of injury and dangers inherent in the riding and handling of horses, and the EXCEPTIONALLY DANGEROUS NATURE of riding cross-country over steep and rough terrain, hereby elects voluntarily to participate in said activities, and does hereby willingly enter into this Release, Waiver & Indemnity Agreement.

THEREFORE, IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN ANY EQUINE ACTIVITY SPONSORED BY USTR, RIDER KNOWINGLY AND EXPRESSLY WAIVES RIDER'S RIGHTS TO SUE USTR, ITS OFFICERS, DIRECTORS, VOLUNTEERS, MEMBERS, EMPLOYEES, AGENTS, SUCCESSORS, HEIRS, AND ASSIGNS, FOR ANY INJURY, DEATH, LOSS, OR DAMAGE CAUSED TO RIDER OR TO RIDER'S PROPERTY, AND RIDER AGREES TO ASSUME ALL RISKS INHERENT IN RIDING OR OTHERWISE COMING IN CONTACT WITH HORSES, INCLUDING, WITHOUT LIMITATION, THE RISKS OF INJURY, DEATH, LOSS, OR DAMAGE TO RIDER OR TO RIDER'S PROPERTY. RIDER ACKNOWLEDGES THAT RIDER HAS BEEN GIVEN NOTICE OF THE RISKS INHERENT IN AND INTRINSIC DANGERS OF EQUINE ACTIVITIES, INCLUDING (i) THE PROPENSITY OF AN EQUINE TO BEHAVE IN DANGEROUS WAYS WHICH MAY RESULT IN INJURY, HARM, OR DEATH TO PERSONS ON OR AROUND THEM; (ii) THE UNPREDICTABILITY OF AN EQUINE'S REACTION TO SUCH THINGS AS SOUNDS, SUDDEN MOVEMENT, UNFAMILIAR OBJECTS, PERSONS, OR OTHER ANIMALS; (iii) CERTAIN HAZARDS SUCH AS SURFACE AND SUBSURFACE CONDITIONS; (iv) COLLISIONS WITH OTHER ANIMALS OR OBJECTS; AND (v) THE POTENTIAL OF A PARTICIPANT ACTING IN A NEGLIGENT MANNER THAT MAY CONTRIBUTE TO INJURY TO THE PARTICIPANT OR OTHERS, SUCH AS FAILING TO MAINTAIN CONTROL OVER THE EQUINE OR NOT ACTING WITHIN THE PARTICIPANT'S ABILITY, AND RIDER EXPRESSLY AGREES TO ASSUME ALL SUCH RISKS AND WAIVES ALL RIGHTS TO SUE FOR INJURIES CAUSED BY SUCH RISKS. THIS WAIVER AND EXPRESS ASSUMPTION OF RISKS SHALL SPECIFICALLY APPLY TO RIDER AND TO ANY AND ALL MINOR CHILDREN AND/OR WARDS OF RIDER, IN ACCORDANCE WITH THE TERMS OF THE CODE OF VIRGINIA, TITLE 3.2, CHAPTER 62 – EQUINE ACTIVITY LIABILITY, AND SHALL BE CONSTRUED TO COMPLY WITH ALL EXCULPATORY TERMS OF THE CODE OF VIRGINIA, TITLE 3.2, CHAPTER 62 – EQUINE ACTIVITY LIABILITY.

IF RIDER IS A MINOR OR OTHERWISE UNDER A LEGAL DISABILITY, THIS AGREEMENT SHALL BE SIGNED BY RIDER'S PARENT OR LEGAL GUARDIAN. BY SIGNING, THE PARENT OR LEGAL GUARDIAN AGREES (i) TO WAIVE THE PARENT'S, GUARDIAN'S, AND RIDER'S RIGHTS TO SUE THE PARTIES NAMED IN THE IMMEDIATELY PRECEDING PARAGRAPH; (ii) TO ASSUME, ON BEHALF OF THE PARENT, GUARDIAN, AND RIDER, THE RISKS SET FORTH IN THE IMMEDIATELY PRECEDING PARAGRAPH, IN ADDITION TO ALL OTHER RISKS OF RIDING OR OTHERWISE COMING INTO CONTACT WITH HORSES; AND (iii) TO INDEMNIFY AND HOLD HARMLESS USTR, ITS OFFICERS, DIRECTORS, VOLUNTEERS, MEMBERS, EMPLOYEES, AGENTS, SUCCESSORS, HEIRS, AND ASSIGNS FROM ANY LOSS, CLAIM, SUIT, OR JUDGMENT RESULTING FROM ANY INJURY, DEATH, LOSS OR DAMAGE SUSTAINED OR CLAIMED BY RIDER (OR RIDER'S PERSONAL REPRESENTATIVE), AND FURTHER TO INDEMNIFY USTR, ITS OFFICERS, DIRECTORS, VOLUNTEERS, MEMBERS, EMPLOYEES, AGENTS, SUCCESSORS, HEIRS, AND ASSIGNS FROM ANY AND ALL COSTS OF DEFENDING SUCH CLAIMS, INCLUDING ATTORNEYS' FEES.

It is expressly agreed by Rider and any parent or guardian whose signature appears on this document that this Release, Waiver and Indemnity Agreement shall be governed and construed as being sufficient to satisfy the assumption of risk and waiver requirements necessary to relieve equine activity sponsors and equine professionals from liability under the Code of Virginia, Title 3.2, Chapter 62 - Equine Activity Liability, and that USTR is covered by the provisions of Title 3.2 Chapter 62 of the Code of Virginia. It is also expressly agreed by Rider and any parent or guardian whose signature appears on this document that the term "Member" as used herein, specifically includes any landowner whose property the USTR meets on, passes through, or otherwise uses in connection with an equine activity, and that any such landowner is covered by the provisions of Title 3.2 Chapter 62 of the Code of Virginia and this Agreement.

This Release, Waiver and Indemnity Agreement shall be governed and construed by the laws of the Commonwealth of Virginia, regardless of where any injury or loss shall occur. In the event that any portion of this Release, Waiver and Indemnity Agreement shall be declared unenforceable, such declaration shall not affect the remaining terms of this document, which shall survive intact.

**Rider has been advised to wear protective headgear at all times while riding or otherwise coming in contact with horses, and expressly assumes the risk of injury resulting from failure to do so and/or from selecting headgear which does not adequately protect against injury.**

**CAUTION: READ BEFORE SIGNING**

\_\_\_\_\_  
Signature of Rider

\_\_\_\_\_  
Rider's Printed Name

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian \*

\_\_\_\_\_  
Parent/Guardian Printed Name

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Parent or Guardian \*

\_\_\_\_\_  
Parent/Guardian Printed Name

Date: \_\_\_\_\_

\*PARENT OR GUARDIAN MUST SIGN IN ADDITION TO RIDER UNDER EIGHTEEN YEARS OF AGE BOTH PARENTS WITH LEGAL CUSTODY OF A MINOR MUST SIGN

