

TWIN STATES BARREL RACING ASSOCIATION

2009-2010 POINT YEAR MEMBERSHIP APPLICATION

PLEASE PRINT CLEARLY

INDIVIDUAL MEMBERSHIP \$50 or FAMILY MEMBERSHIP \$60.00

FAMILY NAME: _____

ADDRESS: _____ CITY STATE ZIP: _____

HOME PHONE: _____ WORK PHONE: _____

CELL PHONE: _____ EMAIL ADDRESS: _____

NAME AND STATUS OF EACH MEMBER UNDER THIS MEMBERSHIP:

<u>MEMBER NAME:</u>	<u>ELIGIBLE FOR ROOKIE?</u> (FIRST TIME MEMBER of TSBRA)	<u>ALL AROUND HORSE</u> \$10. Per Nom. Horse	<u>DATE OF</u> <u>BIRTH</u>
_____	YES NO	_____ \$10.00	_____
_____	YES NO	_____ \$10.00	_____
_____	YES NO	_____ \$10.00	_____
_____	YES NO	_____ \$10.00	_____

NOMINATED HORSE(S) AND DIVISION FOR EACH MEMBER UNDER THIS MEMBERSHIP:

<u>MEMBER NAME:</u>	<u>NOMINATED HORSE NAME:</u>	<u>DIVISION</u> - Check boxes
_____	First horse per member FREE.	<u>YOUTH</u> <input type="checkbox"/> <u>OPEN</u> <input type="checkbox"/> <u>POLES</u> <input type="checkbox"/>
_____	Additional Horses \$10.00 Each	(16 & under as of 9/1)
_____	_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
_____	_____	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

BY MAKING APPLICATION TO JOIN TWIN STATES BARREL RACING ASSOCIATION ("TSBRA"), APPLICANT(S) AGREES TO PARTICIPATE IN TSBRA-SANCTIONED EVENTS AT APPLICANT'S OWN RISK. APPLICANT(S) HEREBY RELEASES AND DISCHARGES DAMAGES AND EXPENSES FOR INJURIES TO PERSON, PROPERTY, REPUTATION OR FINANCIAL CONDITION AS A RESULT OF OR IN ANY WAY RELATING TO APPLICANT'S PARTICIPATION OR FAILURE TO PARTICIPATE IN ANY TSBRA-SANCTIONED EVENT, WHETHER CAUSED BY NEGLIGENCE, BY ARENA OR FACILITY CONDITIONS, BY THE CONDUCT OF TSBRA-SANCTIONED EVENTS OR THE ADMINISTRATION OR FAILURE TO ENFORCE ANY TSBRA RULES, BYLAWS, REGULATIONS OR GUIDELINES OR OTHERWISE. APPLICANT(S) KNOWS AND AGREES THAT BY HIS OR HER APPLICATION ON THIS FORM HE OR SHE COMPLETELY RELEASES TSBRA AND ITS OFFICERS, DIRECTORS, MEMBERS AND SPONSORS FROM ANY LIABILITY, INCLUDING NEGLIGENCE. APPLICANT(S) VOLUNTARILY CHOOSES TO PARTICIPATE IN TSBRA-SANCTIONED EVENTS, AND FREELY AND WILLINGLY CONSENTS TO SAME. APPLICANT(S) FURTHER ACKNOWLEDGES THAT HE OR SHE HAS NO ABSOLUTE PROPERTY OR OTHER RIGHT TO PARTICIPATE IN TSBRA EVENTS. APPLICANT(S) AGREES TO FOLLOW AND BE BOUND BY THE RULES, BYLAWS, REGULATIONS AND GUIDELINES OF TSBRA, AS AMENDED FROM TIME TO TIME. APPLICANT(S) AGREES THAT HIS OR HER SOLE AND EXCLUSIVE REMEDY FOR ANY DISPUTE IS APPEAL TO THE BOARD AS SET FORTH IN THE TSBRA BYLAWS AND AGREES THAT ALL DECISIONS OF THE BOARD ARE FINAL AND CONCLUSIVE.

SIGNED: _____

IF APPLICANT IS A MINOR, PARENT AND/OR GUARDIAN MUST SIGN.

PARENT AND/OR GUARDIAN: _____

DATE _____ PAID BY: Check #: _____ Cash: _____ Amount Paid: \$ _____

Cashier's Initials: _____

TWIN STATES BARREL RACING ASSOCIATION RESERVES THE RIGHT TO REFUSE MEMBERSHIP OR ENTRY TO ANYONE.

Warning – Under Texas Law (Chapter 87, Civil Practice and Remedies Code), an equine professional is not liable for an injury to or the death of a participant in the equine activities resulting from the inherent risks of equine activities.