

SANTA ROSA VALLEY RIDERS 2010 MEMBERSHIP APPLICATION

_____ NEW _____ RENEWAL

(\$35.00 individual or family membership)

(\$20.00 membership after August 30th, new members only)

General Release and Assumption of the Risk

Because equestrian activities are dangerous, all participants must assume all risk of injury and death by signing this release if they wish to participate in any activities of the Santa Rosa Valley Riders.

In consideration of my participation in the equestrian activities of the Santa Rosa Riders and its individual members (collectively called "SRVR" in this release), and in order to obtain SRVR's permission to participate in such activities and to occupy SRVR's premises, I hereby assume all risk of injury or death to myself during or as a result of my participation in such activities and occupancy of such premises. I further assume all legal responsibility for any and all damages to or loss of my personal property which may occur during or as a result thereof; and I will bear any and all medical, dental, hospital and similar expenses and fees that may occur during or as a result thereof; and I waive any and all liability of SRVR and its members for any and all of the foregoing risks, responsibilities, and damages whether caused by negligence or otherwise.

I understand that the activities of SRVR are equestrian activities. I understand that horses are sensitive creatures with minds and wills of their own. I understand that it is not possible for any human being to exercise total control over any horse so as to prevent the animal from injuring others. I understand that SRVR is physically incapable of preventing injury or death to any participant, including myself. I understand that the activities of SRVR are inherently hazardous because of the foregoing and, that my participation in those activities subject me to an ever present risk of injury or death.

I understand and I intend that by signing this document, I am giving up all my rights to: (a) make claims against; (b) file lawsuits against; and/or (c) receive any money from SRVR and/or its members because of any injury, death or loss of any kind occurring during any SRVR's activity.

This release shall remain in effect for any and all future activities of SRVR and whenever I may occupy SRVR's premises, until and unless SRVR has actually received from me a written notice that I revoke my agreement to these conditions.

I have carefully read and understand each paragraph above. I freely and voluntarily agree to all of the terms above without any reservations whatsoever.

Signature of Participant

Signature of parent for participants
Under 18 yrs

First name Last Name Phone number Date

Address City State Zip

Email address: _____ Birthdate (month & day): _____

Permission to release phone/email address to other SRVR members only: YES / NO

I agree to accept the monthly newsletter via email: YES/No

MAKE CHECK PAYABLE TO: SRVR,

Mail to: Missy Stayton, 11472 Barranca Road, SRV, CA 93012 805/491-2608