



CANADIAN PONY CLUB
2018 HORSEMASTERS MEMBERSHIP APPLICATION FORM

Page 1 of 2 (BOTH pages must be completed)

FOR JAN 1 - DEC 31, 2018 (Sept. 1/17 to Dec. 31/18 for new members joining after Sept. 1/17)

WARNING: This document could affect your legal rights and liabilities.

Please read this document carefully.

Revisions of any kind to the wording of this document are not permitted.

It is the responsibility of the applicant to be able to provide PROOF of a valid membership in the Provincial Equine Sport Organization (PSO) of the province of residence AT ALL TIMES while a member of the Canadian Pony Club. If at any time, the applicant cannot provide proof of a valid and current PSO membership, their membership in the Canadian Pony Club shall be not in good standing. The member shall have all Pony Club membership privileges suspended and shall not be permitted to attend any Pony Club activities. The member must maintain a Branch Associate Membership while in the Horsemasters Program

Please print or type all information

BRANCH: _____ **REGION:** _____

LAST NAME: _____ **USUAL GIVEN NAME:** _____

GENDER: M or F (Please circle one) **BIRTHDATE:** ____ \ ____ \ ____ MINIMUM 21 YRS OLD WHEN APPLYING
yyyy \ mmm \ dd

To avoid confusion, please enter in the form 2009/Nov/22. Don't use numbers for both the day and month

STREET & NUMBER: _____

MAILING ADDRESS: CITY: _____ **PROVINCE:** _____

POSTAL CODE: ____ - ____ **HOME PHONE (Incl. Area code) :** ____ - ____ - ____

CELL # _____

Member email: _____

PSO MEMBERSHIP NUMBER: _____

Each applicant must have an Associate Membership form on file with their Branch.

Do you have a current Equine Canada Sport License? Yes No

Are you a Parent Volunteer or Alumni

Member names and/or photos, but no other personal information, may be used from time to time to publicize the Pony Club, and in the reporting of activity results in various media. A minimum of additional information may be disclosed to the Provincial Sport Organizations solely for the purpose of confirming if our member is or is not a member of that PSO. For full details of our privacy policy, ask your DC or visit our web site at www.canadianponyclub.org CPC will also send out newsletters and communications from time to time directly to our members.

Date: _____

Member's Signature

This page must be signed. Unsigned forms must be returned to the applicant.



THE CANADIAN PONY CLUB INC.

2018 MEMBERSHIP APPLICATION FORM (revised August 2016)

Page 2 of 2 (BOTH pages must be completed)

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I acknowledge that the sport of horses is a high risk sport and that I am participating at my own risk and in full knowledge of the hazards and potential hazards inherent in this sport. I further acknowledge the inherent risks in riding and working around horses, which risks include bodily injury to both horse and rider which can result from normal use, competition or schooling.

In consideration of being allowed to participate, I hereby assume all risk, and I hereby release and absolve the Canadian Pony Club Inc. et al, and its affiliated Provincial Club officials, volunteers, Officers, Directors, agents, representatives and employees, and the owners and occupiers of the land upon which the competition/activity is held, from all responsibility, liability or claims of any nature and kind which I may have arising from my participation, including but not limited to bodily injury or death to myself or my horse(s) and damage to property arising from any cause whatever.

I hereby declare that we have reviewed the foregoing Acceptance of Risk paragraphs and have consulted our branch D.C. sufficiently to understand the risks involved in Canadian Pony Club Inc. membership and in Regional and National events and activities. I hereby declare that in signing this document I agree to the conditions stated herein and that it is binding upon my executors, heirs and assigns.

<p>_____ Signature of Member</p> <p>_____ Date</p> <p>_____ Please print name</p>	
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I certify that the above named member has reviewed this document and has had an opportunity to question me for clarification of any items where they were not satisfied that they had a good understanding of the risks. My signature does not indicate any agreement to accept any risks or responsibility related to this member.

<p>This applicant has <u>provided a copy</u> of a PSO membership card which expires on:</p> <p>_____</p> <p>(copy attached)</p>

Branch

<p>This applicant has submitted a PSO membership application and fees <u>through this branch</u> sufficient to cover the period from now through Dec 31, 2018</p> <p>Yes, or No: _____</p>
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Signature of D. C.

Date (this is the official date of this application)

All members must complete this form immediately upon joining Canadian Pony Club (CPC) and upon each renewal of membership. Members who do not submit properly completed Membership Application Forms will not be permitted to take part in any CPC activities unless or until the Membership Application Form is executed and submitted to the Branch. Members may have reasonable opportunity to seek independent legal advice in advance of executing this Form if desired. If any material information changes during the course of the membership, the member is obligated to advise CPC in writing of the revised information.

Completed forms will be kept on file by the Region and used to confirm that all Horsemasters members are aware that there are significant risks involved in working with and around horse and that all Branch and Regional event applicants are aware of the risks involved in competition.