

Joshua Saddle Club Membership Application

Name _____ Phone _____
 Address _____
 City, State, Zip Code _____
 Phone(s) _____
 Email Address _____
 Date of Birth _____

Please list other family members:

Name	Relationship	Date of Birth

Occupation _____
 Employer & Phone # _____
 Spouse's Occupation _____
 Spouse's Employer & Phone # _____

Have you ever belonged to another riding club? _____
 How long were you a member of that club? _____
 If yes, name of club and district _____
 Do you still belong to a riding club? _____
 Give reason for leaving other club. _____

Do you agree not to drink alcoholic beverages while participating in any form of Club,
 District or National activities? _____

Do you agree to help work the events and concession stand during all Joshua Saddle Club
 and District 4 functions? _____

Please list three personal references:

Name	Address	Phone

Who, if anyone, in the Joshua Saddle Club is sponsoring your application?

Please, read carefully:

There is an initiation fee of \$10.00 per family to be made payable to the Joshua Saddle Club. There is also a \$35.00 annual fee for National dues to The National Association. A total of \$45.00 must accompany this application and can all be made payable to the Joshua Saddle Club. If your application is not approved for membership the full amount of \$45.00 will be refunded. There is a \$10.00 subscription fee to receive the monthly publication of the Horsetales – this subscription fee is optional.

Monthly dues are \$10.00 per family or \$100.00 per year if paid in January. If National Dues are paid in another National Association District please indicate above and only \$10.00 is required with this application.

I agree that I do not hold The Joshua Saddle Club, National Association of Riding Clubs and Sheriffs' Posses, and/or any member thereof for any accident or injury, be it personal or physical to me, any member of my family and/or property. It is understood that I and/or any member of my family who takes part in any of the club or association activities does so at their own risk.

Signature: _____ Date _____

Date voted into the club: _____