

DC Western Pro Barrel Racing Association

2019 Membership Application

Name: _____

Address: _____

City/State: _____ Zip: _____

Date of Birth: _____ Age: _____

Telephone Number: _____

Email Address: _____

Emergency Contact: _____

Emergency Contact Number: _____

Legal Guardian's Name (if under age of 18): _____

2019 Membership Fee: \$45.00 New Member _____

Classes Competing in: Youth _____ Senior _____ Open 4D _____ Poles _____

(Check eligibility requirements. You may enter more than one class.)

Liability Release

(Please read the requirements below before signing)

UNDER NORTH CAROLINA LAW: An Equine Activity Sponsor or Equine Professional is not Liable for an injury to or the death of a participant in Equine Activities resulting exclusively from the inherent risk of Equine activities. Chapter 99E. of NC Statutes. I/We the undersigned, release DC Western Pro Barrel Racing Association, and/or its directors and officials, and/or the facility in which this event is being held, from any and all claims which may arise in connection with all events to include any type of injury to participants, spectators, livestock, and/or damage to or the theft of motor vehicles, trailers, etc.

*****DCWPBRA reserves the right to refuse and/or terminate membership at any time*****

I/We fully understand the above release as so indicated by the signature below.

Signature of Participant/Guardian _____

Date _____