

# 2022 CCOBRA MEMBERSHIP FORM

DATE: \_\_\_\_\_

MEMBER NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

If a minor, responsible party name: \_\_\_\_\_

OPEN MEMBERSHIP \$25

Horse 1: \_\_\_\_\_ \$25

Horse 2: \_\_\_\_\_ \$25

Horse 3: \_\_\_\_\_ \$25

TOTAL \$ \_\_\_\_\_ RCVD by: \_\_\_\_\_

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YOUTH MEMBERSHIP (15 Y/O or Under as of Jan 1) \$25

Horse 1: \_\_\_\_\_ \$0

Horse 2: \_\_\_\_\_ \$25

TOTAL \$ \_\_\_\_\_ RCVD by: \_\_\_\_\_

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PEE WEE MEMBERSHIP (9 Y/O or Under as of Jan 1) \$20

TOTAL \$ \_\_\_\_\_ RCVD by: \_\_\_\_\_

Jacket size: XS S M L XL XXL Adult or Child

Shift size: XS S M L XL XXL Adult or Child

Horse Blanket size: \_\_\_\_\_

# 2022 CCOBRA MEMBERSHIP FORM

**By signing the agreement, you are giving up certain legal rights to recover damages in case of injury, death or property damage. Read this agreement carefully before signing it. Your signature indicates your understanding of an agreement to its terms.**

This is an agreement between the Undersigned (or minor in my care) and CCOBRA.

I, \_\_\_\_\_ (hereinafter the Undersigned) on behalf of myself.

1. Acknowledge that horseback riding is a dangerous activity and involves RISKS that may cause SERIOUS INJURY AND IN SOME CASES DEATH.
2. Knowing these facts and in consideration of your acceptance of this form, I voluntarily assume the risk of injury and danger of injury or death inherent in horseback riding activities. I hereby RELEASE, DISCHARGE AND PROMISE NOT TO SUE, anyone involved in the production of this event, for any loss, liability, damage or cost to my person or property.
3. Agree to abide by and follow any instructions given or rules established by CCOBRA or any Officers and Volunteers with regard to my participation in any event.
4. The Undersigned expressly agrees that the foregoing release and waiver of liability, assumption of risk, and indemnity agreement is governed by the State of Arizona and is intended to be as broad and inclusive as is permitted by Arizona Law, and that in the event any portion of this Agreement is determined to be invalid, illegal, or unenforceable, the validity, legality and enforceability of the balance of the Agreement shall not be affected or impaired in any way and shall continue in full legal force and effect.
5. Acknowledge that this document is a contract and agrees that any cost incurred for legal fees will be incurred by the Undersigned.

I have read this document. I understand it is a promise not to sue and a release and indemnity for all claims.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

If the person who is to enter into this agreement is under eighteen (18) years of age, his/her parent or guardian must read and sign for the minor.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_