BACH MEMBERSHIP 2018

Membership Year November 1-October 31

	□Renewal □Family	\$35 + \$15 for each additional fam	illy member
Note: \$20 of your membership fee (\$10 for each additional family memb	per) goes directly to USDF for Group	p Membership
Name (Please Print)		Date of Birth or USI	DF Member
Address City State Zip			
Phone Days /Cell	Phone Eves / Home	E-Mail	
	nary family member on the first lind date of birth.) Indicate Junior me		nal family member
	ase, Assumption of Risk, W		n
I am fully aware and acknowledge podily injury including broken bone 87, Civil Practice and Remedies Co	ment waives important rights. Reathat equine sports and activities inves, head injuries, trauma, pain, suffede), an equine professional is not lial inherent risks of equine activities. It ing, which is set forth above.	volve inherent dangerous risks of ac ering, or death. WARNING: Under T ble for an injury to or the death of a	Texas Law (Chapter a participant in
myself and for any spectator accomprators, personal representative and tharge and agree to hold harmless (BACH") and (ii) any facility, its overauses of action and legal liability fridden by me in connection with an lo further agree that I and My Assemble 1 and legal liability brought against later owned or ridden by me in compy me or on my behalf or by or on beauch release is found to be invalid. Including its/their own gross negliging the second of the secon	on in the Brazos Association for Clapanying me to an Activity (as herein ad assigns (individually and collective) (i) BACH, its officers, directors, memorers, agents, and employees ("Facility and accident, damage, injury or illusy show, clinic, event or function speciates will indemnify BACH and an BACH for injuries or losses caused direction with an Activity and for any ehalf of My Associates notwithstand C. I hereby acknowledge that this regence. D. If I am a parent or guardial above provisions and agree to assu	nafter defined), my family members, vely referred to as "My Associates"; abers, employees, assigns and agent ality") at which an Activity is held of liness to me or My Associates or to a consored in whole or in part by BAC by Facility for any claims, demands, irrectly or indirectly by me or My Associated with any claim which the release set forth in paragraphease releases BACH from its/their an of a minor child, I consent to the	, my heirs, adminis-) to rdease, dis- ts (hereinafter of all claims, deands any horse owned or CH ("an Activity"). Be causes of action esociates or by any nich may be brought ph A whether or not own negligence e child's particapion

Date

Signature of Parent or Guardian

Year End Rider Award Registration 2018

For October 13, 2017 - October 12, 2018 * One horse/rider combo per form please

Rider			H	orse				
Category (circle)		Jr/YR Add		Amateur	Open			
Level (circle all that apply)								
	Dressage:	GAG/Intro Train		ning	1st 2nd		3rd	4th–FEI
	Eventing:	GAG	Beg Novice	Novice	Train	ing	Prelin	ninary
Data suhn	nitted	Foo(s)	· \$5 00 for each	n laval/catam	orv eire	olad To	ntal·	Chack#
Date submittedFee(s): \$5.00 for each level/category circled Total:Check#								

Year End Rider Award Registration 2018

For October 13, 2017 – October 12, 2018 * One horse/rider combo per form please

Rider			Horse					
Category	Sategory (circle) Jr/YR		Adult Amateur		(Open		
Level (circle all that apply)								
	Dressage:	GAG/In	GAG/Intro Trai		1st	2nd	3rd	4th–FEI
	Eventing:	GAG	Beg Novice	Novice	Training		Preliminary	
Date submittedFee(s): \$5.00 for each level/category circled Total:Check#								

Questions about Year End Awards?

Cathy Ruoff, cruoff@cvm.tamu.edu

Mail scores to Cathy Ruoff, 2503 Warkworth Ln, College Station, TX, 77845