

FORT WORTH DRESSAGE CLUB MEMBERSHIP APPLICATION

<http://www.fortworthdressageclub.com>

Membership Date: December 1, 2020 thru November 30, 2021

Name _____ USDF ID# _____

Address _____ Birthdate (for USDF): _____

City/State _____ Zip _____

Day Phone _____ Evening Phone _____ E-mail _____

Each membership includes the USDF Connection monthly magazine, eligibility to compete in USDF competitions, participate in USDF Rider awards, and earn USDF University credits.

Family membership is available for additional members of the same household with all the above benefits, except members will share printed material.

MEMBERSHIP FEES:

Primary Member:

\$35 Junior Rider

\$45 Individual (Amateur or Professional)

\$65 Business (includes business card printed in newsletter)

- \$7.00 If renewing from 2019/2020 membership year

\$_____ **Total dues for primary member**

I WOULD LIKE TO SERVE IN THE FOLLOWING AREAS:

Board of Directors

Show Committee

Help w/Education Programs

Give Clinics

Organize Clinics

Junior Riders

Anywhere needed (list any special skills):

Additional Family Members (+\$30 each). Use back of form, if needed:

\$30 Name _____ USDF ID# _____ Birthdate _____

\$30 Name _____ USDF ID# _____ Birthdate _____

\$_____ **Total dues for additional members**

\$_____ **Total check amount, payable to Fort Worth Dressage Club**

I hereby release the Fort Worth Dressage Club, its officers, members, employees and agents from any liabilities and all claims of every kind including costs, expenses, or attorney fees that might result from damages, injuries, or losses resulting directly or indirectly from the negligent act or omissions of the officers, members, employees or agents of the Fort Worth Dressage Club.

Signed _____ **Date** _____

(If Junior Rider, this form must be signed by parent or guardian)

Mail this form, with appropriate check, to:

Donna Claunch, 1308 Marydale Drive, Arlington, TX 76013, email: membership@fortworthdressageclub.com