



Spokes and Spurs Membership Form

I understand that neither Spokes & Spurs, Inc. (“S&S”) nor its officers accept any responsibility for accidents, damage, injury or illness to the horses, owners, riders, drivers, grooms, passengers, attendants, spectators, or any other person or property in connection with any activities. I hereby expressly agree for myself and my principals, representatives, employees, and agents: to be bound by the rules of the activities; and to accept as final any decision of the officials or officers on any question arising under the local rules of the Competition, and agree to hold S&S, their officers, directors, employees and agents, judges, officials and organizing committees, harmless for any action taken. I am fully aware that horse sports, including driving, and activities involve inherent dangerous risk of serious injury or death and by participating I do so voluntarily and expressly assume any and all risks of injury or loss, and I agree to indemnify and hold S&S, their officers, directors, employees and agents, officials, and organizing committees, harmless from and against all claims including any injury or loss suffered during or in conjunction with the club or activities, whether or not such claim, injury or loss resulted, either directly or indirectly, from the negligent acts or omissions of S&S, their officers, directors, employees and agents, officials and organizing committees.

Member Information

Individual Membership Or Family Membership

Member(s) Names: _____

Address: _____

Email 1: _____

Phone: _____

Email 2: _____

Phone: _____

Preferred activities you would like to participate in: _____
(Use back of form if you need more space.)

CAA Member?

ADS Memer?

USEF Member?

Do we have your permission to photograph you and family members for publications at S&S events?

Yes

No

To be signed by member or family representative, signature indicates your (and family members) agreement to abide by the disclaimers.

Adult Signature: _____

Date: _____

Adult Signature: _____

Date: _____

**Mail check made out to: Spokes and Spurs (\$35 family, \$30 individual) and this membership form to:
1145 Hill Rd., Paris, KY 40361**