

**Lewiston Roundup Association**

P.O. Box 314 Lewiston ID 83501

**2015-2016**

**Riding Membership Contract & Release Form**



Throughout this contract the wording "You" and "Yours" refers to the individual or organization whose signature appears at the bottom of this contract. The word "we" refers to the Lewiston Roundup Association.

This agreement applies to "Bodily Injury" and "Property Damage".

As a condition of membership or arena rental we will not be held responsible for "Bodily Injury" caused by an occurrence arising out of the use of our facilities. Bodily injury means: Any injury, sickness or disease sustained by a person(s) or horse(s), including death resulting from any of these.

Nor will we be held liable for property damage or loss to personal property or any other items whether in use or stored at our facility. Personal property means any tangible items.

<u>Membership Rates:</u>	Adults	\$ 60.00 per year
OFFICE USE ONLY: PAID: _____ CARD(S) ISSUED: _____ MEMBERSHIP LIST: _____	Children	\$ 48.00 per year (14 years of age and under)
	Family	\$ 240.00 per year (2 Adults and 3 Children 14 and under)

**\*\*\*All members must have an issued membership card for identification purposes. Please come in to the Lewiston Roundup office to get you new membership card. If you have any questions please give the office a call - (208) 746-6324. You may email this application and call with credit card for payment.**

Name (please print): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

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

Email Address: \_\_\_\_\_