



2015 North Country Riding Club

MEMBERSHIP APPLICATION

Date: ___/___/___ Membership Number: _____ (office use)

Name: _____ Phone: _____

Mailing Address: _____ Town: _____ State: ___ Zip: _____

E-Mail: _____
(so you can be added to mailing list for updates & notices)

Spouse: _____

Member's Names: (use back if needed)

_____	DOB _____	Year End Fee _____
_____	DOB _____	Year End Fee _____
_____	DOB _____	Year End Fee _____
_____	DOB _____	Year End Fee _____

ANNUAL FEES/DUES: (check category) **New Membership _____ or Renewal _____	
To Qualify for Year-End Awards: One time fee per horse/rider combination ---> \$10 per person to be paid the 1st time you show in 2015	
Full Family \$20	\$ _____
Individual and/or Spouse/Significant Other \$15 (2 people)	\$ _____
Youth (18 & under) \$10	\$ _____
Senior (55 yrs. & older) \$10	\$ _____
Total Year-End Awards Fee/s	\$ _____
Total	\$ _____

NORTH COUNTRY RIDING CLUB AND ANY MEMBER/OFFICER OF THIS ASSOCIATION SHALL NOT BE HELD LIABLE FOR ANY INJURY RESULTING TO MEMBERS, NON-MEMBERS, HORSES, OR EQUIPMENT AT ANY ACTIVITY RELATING/SPONSORING THE NORTH COUNTRY RIDING CLUB.** INDIVIDUALS ARE RIDING/PARTICIPATING IN THE NORTH COUNTRY RIDING CLUB AND ANY RELATED/SPONSORED ACTIVITY AT YOUR OWN RISK**

Signature of Applicant Date: _____

Signature of Applicant Date: _____

Signature of parent or guardian Date: _____

***The APPLICANT AND/OR GUARDIAN must sign twice if you have a youth in your membership Mail Membership Form & Dues To:**

Send to North Country Riding Club - c/o Amanda Sherburne-785 North Road-Ripley, ME 04930

NORTH COUNTRY RIDING CLUB MEMBERSHIP RECEIPT

Membership # _____ Effective Date: _____

Name(s) _____

Membership Type: _____ Amount Received: _____

Officer Signature: _____ Date Received: _____