

The United States Trail Ride, Inc. 2012 Membership Application Form (Valid through 12/31/2012)

2012 Membership Types and Dues: _____ New _____ Renewal

Annual Dues: Single \$25 or Family \$35 = _____ + USPS mailed newsletter add \$10 _____ = \$ _____
(Dues include email newsletter) (Optional)

Last Name: _____ First: _____ Cell # _____

Spouse Last : _____ First: _____ Cell # _____

Dependent Last Name: _____ First: _____ Cell # _____

Dependent Last Name: _____ First: _____ Cell # _____

(Copy this form to add additional dependents to this application)

Address: _____

City/State/Zip: _____

Home Phone (_____) _____ Email _____@_____

Emergency Contact: _____ Contact #(_____) _____

Please circle areas you are willing to volunteer for:

Membership * Publicity/Advertising * Trail-work * Social-events * Education * Ride-planning * Leading-rides * Newsletter *
Photography * Community/Govt-relations * Club Leadership * Grant Writing/Research * Sales/Fundraising * Safety * Other, please
list: _____

_____ *I acknowledge I must bring a copy of my current negative coggins for each horse attending any USTR event.*

2012 Trail Tag Purchase (optional) - Blue Ridge Center for Environmental Stewardship in Neersville, VA

I have read and will abide by "The Rules" for riding at BRCES located on this website: <http://www.ustrailride.org/BRCESRules.html>
(Signature(s) required below)

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

Signature _____ Date _____

Have all adult riders attended a BRCES Orientation Ride? ____No ____Yes # of trail tags: _____ x **\$35** = \$ _____

Trail tag fees are used to maintain the trails and to support BRCES operations.

Total membership and trail tag fees: \$ _____

(Optional) Tax Deductible Donation to **Blue Ridge Center for Environmental Stewardship** [BRCES]: \$ _____

Two days of trail work performed in 2011 will be worth \$20 towards a 2012 BRCES trail tag.

Total Check enclosed: \$ _____

_____ A **separate** signed liability waiver for **each** member is enclosed. Please print and send with this form. Each member named on this membership application **MUST** return a signed liability waiver. **LIABILITY WAIVERS FOR DEPENDENTS UNDER AGE 18 MUST BE SIGNED BY BOTH PARENTS, IF APPLICABLE, OR LEGAL GUARDIAN(S).** See www.ustrailride.org/downloads/USTRRelease.pdf for a copy of waiver.

Sign & Mail this form along with signed waivers for **each** member. Send Total membership/trail tag fees **payable to USTR** to:
USTR c/o Justine Gettman, 11312 Dutchman's Creek Road, Lovettsville, VA 20180