

# Membership Application and/or Renewal Form 2012

## Tuckahoe Equestrian Center

Membership Chairman, Burt Brodt  
6051 Canterbury Drive  
Easton, MD 21601

Name: \_\_\_\_\_

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

Home phone: \_\_\_\_\_

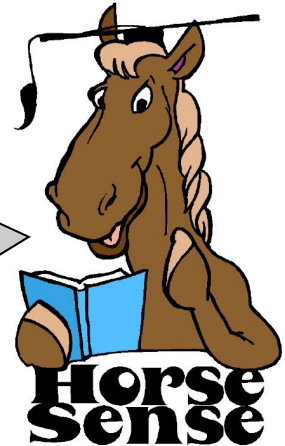
Cell phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

(newsletters will be e-mailed effective January 2012)

\_\_\_\_ Check here to receive newsletter by U.S. mail.

**YOU MUST  
COMPLETE  
THE BACK  
OF THIS  
FORM**



I have enclosed my membership fee as indicated below. I understand I will receive a monthly newsletter, and that I may participate in all T.E.C.-sponsored activities, having completed and signed the back of this form.

\_\_\_\_\_ I am a new member

\_\_\_\_\_ I am renewing my membership.

*Renewal membership fees are due and payable January 1 of each calendar year.*

*New membership fees received after September 1 will be applied to the upcoming full year's membership.*

Check one:

\_\_\_\_\_ Individual Membership \$15.00

\_\_\_\_\_ Family Membership \$25.00 (One or two adults and any minor children under 18)

I would like to make an additional donation of \$ \_\_\_\_\_. I understand that the Tuckahoe Equestrian Center is an all volunteer organization and that my donation is tax deductible.

Please contact me if I can be of assistance to the club in the following ways: (Check all that apply.)

\_\_\_\_\_ grounds (watering, etc.)

\_\_\_\_\_ public relations/ advertising

\_\_\_\_\_ trail maintenance

\_\_\_\_\_ carpentry work

\_\_\_\_\_ painting

\_\_\_\_\_ pony ride walker

\_\_\_\_\_ event assistance

\_\_\_\_\_ trail ride assistance

\_\_\_\_\_ archives & photo history

\_\_\_\_\_ provide farm equipment

\_\_\_\_\_ parade participant

\_\_\_\_\_ strong back

\_\_\_\_\_ for occasional projects

\_\_\_\_\_ meeting refreshments

\_\_\_\_\_ Haunted Walk volunteer

\_\_\_\_\_ other...I can do the following: \_\_\_\_\_

***PLEASE TURN OVER AND SIGN ON BACK  
SEND COMPLETED FORM & CHECK (payable to T.E.C.) TO:***

**TUCKAHOE EQUESTRIAN CENTER  
Membership Chairman, Burt Brodt  
6051 Canterbury Drive, Easton, MD 21601**

\*If you are applying for a family membership, **all** family members must sign below. Both parents must sign on behalf of their minor children.

**THIS RELEASE MUST BE SIGNED BY NEW MEMBERS  
AND ANNUALLY BY ALL RENEWAL MEMBERS  
Each member listed below will receive a separate membership card.**

**RELEASE OF LIABILITY**

I, the undersigned, on my own behalf and on behalf of my minor child/children, acknowledge that:

I am aware that horseback riding or driving a horse drawn vehicle is a dangerous activity. I acknowledge that horses are animals, and as such are unpredictable and easily startled. I acknowledge that I am aware that serious injury and/or death may occur in an accident sustained in riding or driving horses. I am aware that the TUCKAHOE EQUESTRIAN CENTER FOUNDATION, INC., (hereinafter sponsor), the organization sponsoring and holding 2012 horseback riding or driving activities, has the right to turn down my request to participate in all or any one or more of the 2012 scheduled activities.

In consideration of being allowed to participate in the 2012 activities conducted by or under the sponsorship of the TUCKAHOE EQUESTRIAN CENTER FOUNDATION, INC., I, the undersigned, on my own behalf and on behalf of my minor child/children participating in the sponsor's activities, agree to defend and hold harmless the TUCKAHOE EQUESTRIAN CENTER FOUNDATION, INC., and the STATE OF MARYLAND, owner of the grounds, from any claim, loss or injury which may be alleged to have been caused to any person or thing by the act or acts of my horse or my child's horse while engaged in the sponsored activities, or while on the grounds upon which the activities are conducted. I further agree that in consideration of being allowed to participate in the 2012 activities, I shall hold harmless the aforementioned parties from the loss of or injury to my horse, my child's horse, or other personal property, whether the loss, damage or injury is caused or alleged to be caused by the negligence of the sponsor, sponsor's agent, or owner of the grounds.

I hereby assume sole responsibility for and agree to defend and hold harmless the aforementioned parties from any and all loss and expense, including legal fees, for injury, including death, sustained by any person or persons, including myself and my child/children arising out of and as a consequence of participation in the sponsor's activities.

I hereby certify, under penalty of perjury, that: I am covered by medical/hospitalization insurance OR I am self insured, and/or understand that I am solely responsible for my own medical bills due to injury received while participating in a Tuckahoe Equestrian Center Foundation, Inc. - sponsored activity. \_\_\_\_\_ (initials)

As witness my hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
(date) (month) (year)

**PRINT NAME** THIS SIDE

**SIGNATURE HERE** (Indicate if parent or child)

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