

# Zia Paint Horse Club Membership Form

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

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

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

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

APHA Membership number (if available): \_\_\_\_\_

ZPHC membership.

\_\_\_\_ Individual \$15.

\_\_\_\_ Family \$20.

(Family includes: Husband and wife and their children under 19 as of the proceeding Jan. 1)

Name additional family members included in membership and birth dates of minor children.

\_\_\_\_\_  
\_\_\_\_\_

**Make checks payable to ZPHC and mail along with completed form to:**

Zia Paint Horse Club, PO Box 24190, El Paso TX, 79914

Office information. Date received \_\_\_\_\_ received by Initials \_\_\_\_\_

Check # \_\_\_\_\_ Amt. \_\_\_\_\_ Cash Amt. \_\_\_\_\_

**ZIA PAINT HORSE CLUB PARTICIPANT RELEASE FORM**  
**Must be completed by each individual club member**

1. Date: \_\_\_\_\_

2. Agreement: As consideration for being allowed to participate in and with the Zia Paint Horse Club, the undersigned:

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

Agrees to the following:

**3. ACKNOWLEDGEMENT OF RISK:** The undersigned acknowledges that horseback riding is a dangerous activity and that the participation in horseback riding and training exposes the participant to a substantial and serious risk, whether foreseen or unforeseen, including but not limited to property damage, personal injury, and even death. The undersigned expressly acknowledges that his/her participation in and with the Zia Paint Horse Club will involve such a hazard.

**4. RELEASE OF SPONSORS:** The undersigned, being fully aware that participation in the Zia Paint Horse Club will expose him/her to a substantial and even serious risk of property damage, personal injury or death, hereby releases all sponsors, Zia Paint Horse Club, their officers, all class of members, employees, servants and agents, including their heirs and assigns from liability for any and all damages, personal injuries or any other claims arising from the undersigned's participation in the Zia Paint Horse Club, including those that are known and unknown, foreseen and unforeseen, past, present, future or contingent.

**5. COVENANT NOT TO SUE:** The undersigned covenants that the undersigned shall not now or at any time in the future, directly or indirectly, commence or prosecute an action, suit, or other proceeding against all sponsors, Zia Paint Horse Club, and their officers, all class of members, employees, servants and agents, including their heirs and assigns, arising out of, or related to the actions, causes of action, claims and demands hereby waived, released or discharged by the undersigned.

**6. ASSURANCES:** The undersigned has full power, authority, capacity and right without limitation to execute, deliver and perform this release.

**7. BINDING EFFECT:** This release shall be binding upon the undersigned, the undersigned's spouse, legal representatives, heirs, successors, and assigns.

This release has been carefully read by the undersigned, and the undersigned fully understands its terms and conditions and has voluntarily executed and delivered this release on this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

**MUST BE SIGNED REGARDLESS OF AGE.**

Age of Participant \_\_\_\_\_ Birthdate \_\_\_\_\_

I, \_\_\_\_\_, have read the above release in full, fully understand its terms and conditions and I hereby voluntarily execute and deliver this consent to attend and participate in the Zia Paint Horse Club and its Events. I further agree to be dually bound by the release's terms and conditions in both my individual capacity and/or in my capacity as parent or legal

guardian for participant \_\_\_\_\_

Participant Signature \_\_\_\_\_

Consent of Parent or Legal Guardian \_\_\_\_\_

Note: Participants under 18 years of age must have the signature of their parent or legal guardian.