

# BACK COUNTRY HORSEMEN OF NEVADA

Carson Valley Chapter, PO Box 4444, Carson City, Nevada 89702

MEMBERSHIP APPLICATION. The purpose of this organization shall be:

1. To perpetuate the common sense use and enjoyment of horses in America's back country and wilderness.
2. To work to insure that public lands remain open to recreational stock use.
3. To assist the various government and private agencies in their maintenance and management of said resource.
4. To educate, encourage and solicit active participation in the wise use of the back country resource by horsemen and the general public commensurate with our heritage.
5. To foster and encourage the formation of new state organizations and BCHA.

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE: HM \_\_\_\_\_ WK \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ FAX \_\_\_\_\_

INDIVIDUAL MEMBERSHIP \$35  FAMILY MEMBERSHIP \$50  CONTRIBUTOR \$100

Names of Family Members \_\_\_\_\_

## BACK COUNTRY HORSEMEN OF NEVADA LIABILITY RELEASE

I \_\_\_\_\_, in consideration of the acceptance of my membership as part of the Back Country Horsemen of Nevada and for all participating events sponsored by the Back Country Horsemen of Nevada or in which this organization is in any way participating or affiliated, hereby release and discharge the Back Country Horsemen of Nevada, its officers, directors, members, employees, agents, contractors, guests, invitees, and affiliated individuals and entities from all actions, claims or demands that I, my heirs, personal representatives or assigns now have or may hereafter have for personal injuries or property damage resulting from my participation in any ride or event of whatsoever type or nature. I agree that this release includes injury or damage caused in whole or in part by negligence, active or passive, of the Back Country Horsemen of Nevada and or its members, employees, landowners, agents and contraction parties. I recognize the fact that there is a potential for an accident wherever horse use is involved which can cause injury to horses, riders, and spectators. I further recognize that Back Country Horsemen of Nevada, chapters, officers, directors or members cannot always know the condition of trails or off trail areas, or the experience of riders or horses taking part in trail rides or other functions, I do hereby release the above named from any claim or right for damages which might occur to me, my minor children, or horses or other property.

I have carefully read this agreement and release and I understand that it is a complete release of Liability and a promise not to sue or make claim. I am aware this is a contract between me and the Back Country Horsemen of Nevada.

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

(If a minor, parents must also sign below)

I would like to get phone and/or email reminders of meetings Yes  No   
I would like to get phone and/or email reminders of work parties & special events Yes  No