

# Wayne City Saddle Club Membership Application 2023

If you would like to become a member of the Wayne City Saddle Club Inc. or renew your membership, please fill out the following application and return it to:

Wayne City Saddle Club P.O. Box 28 Wayne City, IL 62895

## Membership Dues:

- \_\_\_ \$5 Day/Show Membership
- \_\_\_ \$10 Single (must be at least 18 years or parental signature)
- \_\_\_ \$20 Family (all persons residing at the residence)

NAME \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

	Name	Date of Birth	Age
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

I declare that I am over the age of 18 and all member(s) stated above reside at the listed above address. I am the legal guardian(s) of any minor children listed above. By signing this agreement I understand, do hereby release, discharge and hold harmless, The Wayne City Saddle Club Inc., its members and officers, their assigns, land owner(s), and successors from any and all claims arising out of accidents, incidents, injury including death during any rodeos, barrel shows, or any equine related and/or social function held by the Club. I agree to pay the membership listed above and remain in good standing for the duration of this membership, which is detailed in the WCSC Bylaws. A copy of said Bylaws are available online or by request.

**Signature of Member, (Parent or legal guardian if under 18 y/o)** \_\_\_\_\_

\_\_\_ I have read or have been given the opportunity to read and understand the WCSC Bylaws.

\_\_\_ I hereby grant WCSC permission and consent to take photos and/or video of all persons listed for the use of media coverage and/or publicity materials.

Received by \_\_\_\_\_ Date \_\_\_\_\_ Amount \_\_\_\_\_ Cash or Check# \_\_\_\_\_