

# 2024 Williamsport Riding Club Membership Application

*(Effective January 1st, 2024 to December 31st, 2024)*

Name: \_\_\_\_\_ Age as of Dec 1st, 2023: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Address: \_\_\_\_\_  
Street City/Town State Zip

Phone: \_\_\_\_\_  
 (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Membership Type:  Individual (\$20)  \*Family (\$30)

\*For family memberships, 2 adults and minor children (parent(s) or legal guardians of minor children in same household.)

Note: Our insurance requires that 18 year olds must have an Individual membership regardless of address.

Please list all family members and ages below

Name: \_\_\_\_\_  
 Date of Birth & Age as of Dec 1: \_\_\_/\_\_\_/\_\_\_    \_\_\_/\_\_\_/\_\_\_    \_\_\_/\_\_\_/\_\_\_    \_\_\_/\_\_\_/\_\_\_    \_\_\_/\_\_\_/\_\_\_

### Membership Rules & Benefits

- See membership code of conduct and general rules on the website; posted in the club house and detailed in the membership brochure. Members in good standing will qualify for the following benefits. See website for more details. [www.williamsportridingclub.com](http://www.williamsportridingclub.com)
- All members in good standing have access to the grounds including the arenas for schooling when shows/activities are not scheduled. Please note, anyone coming onto the grounds when an event is not being held must be a member. Note: Access to grounds limited from sunup to sundown on non-show days.
- All members are eligible to accumulate points toward WRC Member Year End awards including winning the top prize of a saddle.
- All members are exempt from the \$5 grounds fee at WRC sponsored shows.
- Adult members may vote for the board of directors at the November annual meeting.

Members are encouraged to attend monthly meetings. Members may participate in the monthly meetings and serve on committees. Meetings are held on the 3<sup>rd</sup> Monday of the month at 6 p.m. See the club Facebook page or website for location.

Please contact the President if you have an item for the agenda.

To be eligible for the member year end awards, a minimum of 3 hours of volunteer work is required. Hours must be completed by: **August 10, 2024.**

We are challenged every year to plan and provide quality events. However, in order to continue to host these events we need your help.

See table below for volunteer options.

<ul style="list-style-type: none"> <li><input type="checkbox"/> Setting up prior to show</li> <li><input type="checkbox"/> Working the gate during show</li> <li><input type="checkbox"/> Restock ribbons during show</li> <li><input type="checkbox"/> Ring crew at show (set up and tear down equipment)</li> <li><input type="checkbox"/> Clean up after the show (garbage, bathrooms)</li> <li><input type="checkbox"/> WRC work days (painting, cleaning up brush, clean clubhouse)</li> <li><input type="checkbox"/> Serve on a committee</li> <li><input type="checkbox"/> Have someone volunteer in your place</li> <li><input type="checkbox"/> Secure an advertising sponsor for the club website and program booklet</li> <li><input type="checkbox"/> Other _____</li> </ul>	<p>Other options to fulfill requirements:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Donating an item can replace 1 hour of volunteer time. For example a \$20 value donation and/or sponsorship for the yearend banquet's Silent or Chinese auction would count for one volunteer hour (recognition will be provided at the banquet for sponsors, due 8/10/2024).</li> </ul> <p><b>In order to be eligible for Member yearend awards. It is your responsibility to ensure we have your time and/or donation logged with us in the office.</b></p>
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I understand that neither the Williamsport Riding Club, its officers, board of directors, judges, or organizing committee accept any responsibility for accidents, damage, injury or illness to the horses, owners, riders, trainers, spectators or any other person or property in connection with events held at the Williamsport Riding Club. I hereby expressly agree for myself and my principals, representatives, employees and agents: (1) to be bound by the local rules of this competition; (2) that every horse and rider is eligible as entered; (3) and to accept as final any decision the competition officials on any question arising under the competition rules, and agree to hold the WRC, its officers, board of directors, show committee, and competition judges, harmless for any action taken. I am fully aware that horse sports, and competition involve inherent dangerous risk of serious injury or death and by participating I do so voluntarily and expressly assume any and all risks of injury or loss, and I agree to release the WRC, its officers, directors, show committee and competition judges, from and against all claims including any injury or loss suffered during or in conjunction with events held at the Williamsport Riding Club. I agree to indemnify and hold harmless the WRC its officers, directors, competition judges, from any and all claims for loss or injury caused by me or my horse that occur during or in conjunction with events held at the Williamsport Riding Club

Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_  
Print name (Adult)

<p><b>Please return membership form and check made out to WRC to:</b>                  Attn: Membership Chair                  Williamsport Riding Club                  2012 Poco Farm Road                  Williamsport, PA 17701</p>	<p>Note: Membership applications are voted on at the WRC business meeting following the date of the application and go into effect on that date for grounds use on non-show days. Membership privileges may be revoked for members not in good standing for such causes as bad checks, poor sportsmanship or other reasons discussed and approved by the board.</p>	<p style="text-align: right; font-size: small;">OFFICE USE ONLY</p> <p>Received Date _____ Received by _____                  Paid Check # _____ / CASH                  Dates and hours volunteered                  ___/___/_____                  ___/___/_____                  ___/___/_____                  Membership Date approved _____</p>
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