

Sidney Saddle Club  
PO Box 72  
Sidney, MT 59270



## Event/Day Membership

Event: \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_ Please Print DOB: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State/Zip: \_\_\_\_\_ e-mail address: \_\_\_\_\_



**Family 20.00**

(Children age 18 or under as of Jan 1<sup>st</sup>  
of the current year)

Please list name and date of birth

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



**Single 10.00**

You must be of legal age to become an individual member of the Sidney Saddle Club. Minors may only be part of a family membership

### RELEASE AND WAIVER OF LIABILITY

In consideration of being permitted to use the Sidney Saddle Club Facilities located in Sidney, MT the undersigned for himself, his heirs, personal representatives and next of kin agrees and represents that he hereby releases, waives, discharges, and covenants not to sue the Sidney Saddle Club or its members from all liability for any and all loss or damage and any claim or demands thereof on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the Sidney Saddle Club or otherwise while the undersigned is in or upon the premises of the Sidney Saddle Club. He also hereby assumes full responsibility for and risk of bodily injury, death, or property damage due to the negligence of the Sidney Saddle Club or otherwise while in or upon the premises of the Sidney Saddle Club. The Undersigned further expressly agrees that the foregoing release and waiver agreement is intended to be as broad and inclusive as is permitted by the law of the State of Montana.

I have read this document; I understand it is a release of all claims. I understand I assume all risk inherent to the use of the Sidney Saddle Club facilities. I voluntarily sign my name evidencing my acceptance of the above provisions.

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