

**Williamson County Sheriff's Posse
Membership Application
P.O. Box 2103
Georgetown, Tx 78627**

Name: _____

Mailing Address: _____

City & Zip: _____

Home phone: _____

Cell Phone: _____

Date of Birth: _____

Email: _____

What are your reasons for joining the Sheriff's Posse: _____

Lifetime Member (having met all requirements as stated in the Bylaws) No Charge

Active Member benefits & requirements 20.00

Family Rate (all residing within the same household) \$30.00

- _____ Email notification of events and meetings
- _____ Gate Code to Outdoor Arena – to be used by members only. Use www.georgetownrodeo.com to check for availability
- _____ Attend General Membership Meetings
- _____ Sign Attached Waiver and Release of Liability
- _____ 15 Volunteer hours yearly. Please check all areas of interest _____ Arena grounds & maintenance
 - _____ Acquire Sponsorships from area business
 - _____ Ticket booth during the Rodeo
(work 4 hours 1 night and attend 1 night free)
 - _____ Gate Security - Rodeo
 - _____ Activities - Rodeo
 - _____ Children's activities - Rodeo

Arena Use Member \$150.00

Posse monthly meetings are held at the Georgetown San Gabriel Park Showbarn next to the Rodeo Arena, located at: 415 E. Morrow Drive, Georgetown 7:30 to 9 PM the 4th Thursday of each month, unless it falls on a holiday. An agenda will be published and emailed prior.

V.2 dated 8 October 2014

Please check if you are interested in any of the following WCSP activities:

<input type="checkbox"/> WCSP Drill Team Participates in rodeo grand Entries, Parades and Performances

<input type="checkbox"/> Rodeo Committee Entertainment, Vendors, Tickets, Security, Sponsorships, Corral Boss help, and membership

As a non-profit organization we strive to be an integral part of the community and provide activities and services related to our deep western heritage.

EQUINE WAIVER AND RELEASE OF LIABILITY

CAUTION: READ BEFORE SIGNING

Participant's Name: _____ Date of Birth: _____

IN CONSIDERATION of being permitted to participate among and on horses, including but not limited to riding, handling, or otherwise being near horses, on the premises of or under auspices of **The Williamson County Sheriff's Posse'**, on my behalf and on behalf of the participant named above (we collectively call ourselves "I" in this release), I acknowledge, appreciate, and agree that:

_____ I UNDERSTAND that the activity of horseback riding involves numerous risks of injury that are my responsibility, and

_____ I assume these risks. I further understand that an animal, irrespective of its training and usual past behavior and characteristics, may act or react unpredictably at times based on instinct or fright which is a risk to be assumed by each participant in the riding activity.

_____ I AGREE TO HOLD HARMLESS AND INDEMNIFY **The Williamson County Sheriff's Posse'** and/or its members (the "Releasees") from all liability due to Releasees' own negligence in relation to the premises, equipment and/or operations of **The Williamson County Sheriff's Posse'**, including but not limited to while riding, handling, or otherwise being near horses owned by or in the care, custody and control of **The Williamson County Sheriff's Posse'**.

_____ I HEREBY AGREE TO RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE the Releasees from all liability for any economic and non-economic losses due to bodily injury, death, and/or property damage, sustained by me and/or my minor child or legal ward, whether caused by Releasees' own negligence or otherwise, in relation to the premises, equipment, and/or operations of **The Williamson County Sheriff's Posse'** including but not limited to while riding, handling, or otherwise being near horses owned by or in the care, custody and control of **The Williamson County Sheriff's Posse'**.

UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM INHERENT RISK OF EQUINE ACTIVITIES.

I HEREBY AGREE to comply with all rules of **The Williamson County Sheriff's Posse'** while I participate among and on horses, including but not limited to while riding, handling, or otherwise being near horses, at **The Williamson County Sheriff's Posse'**.

I HAVE READ THIS ENTIRE WAIVER AND RELEASE OF LIABILITY AND FULLY UNDERSTAND ITS TERMS,
UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL LEGAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND
VOLUNTARILY WITHOUT ANY INDUCEMENT OR COERCION BY ANYONE.

X _____ Date: _____ Signature
of Participant or Parent/Legal Guardian

V.2 dated 8 October 2014