



2016 Membership Form

Last Name _____ First Name _____

Mailing Address _____ City _____ State _____ Zip _____

E-mail address _____

Phone _____ Cell _____

_____ **Annual membership includes qualifying fee for Finals Awards. \$65**

_____ **Additional horse with qualifying fee for Finals Awards. \$50**

Release: I agree to release and hold harmless Northwest 5D, all members, arena owners, arena operators, producers, and any or all persons connected with all Northwest 5D approved events from losses, damages, or injury to me, my equipment and/or any animals resulting from attending and/or participating in any Northwest 5D sanctioned events.

Signature _____ Date _____

If applicant is under 18 years of age, this release must be signed by a legal guardian.

I hereby swear to the above release and unconditionally give my permission for the above named applicant to compete at Northwest 5D sanctioned events.

Signature _____ Date _____

Mail to: Northwest 5D 54444 Kalberer Rd. Scappoose, Oregon 97056 503- 936-4304