



CIRCLE K-D TRAILRIDERS 2022 MEMBERSHIP FORM

Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____ Alt. Number: _____

Email Address: _____

Preferred Communication (circle one): *Call E-mail Text*

For FAMILY MEMBERSHIP please indicate all family members' names and children's ages.

**NOTE: Limit 2 adults (22 yrs. old or older) per family membership. Family membership is limited to parents or stepparents and their children or stepchildren.

(Name - first, last) _____ age, (if child)

(Name - first, last) _____ age, (if child)

(Name - first, last) _____ age, (if child)

(Name - first, last) _____ age, (if child)

(Name - first, last) _____ age, (if child)

(Name - first, last) _____ age, (if child)

Authorization for Participant under 18 years old(minor):
In my absence I authorize the following adults to be responsible for this minor in event of an accident:

Print first/last name of minor: _____

Print first/last name of adult(s) to be responsible: _____

_____ Phone: _____

Membership Type/Dues (circle one)

Working*:

Single \$60.00

Family \$100.00

Non-Working

Single \$300

Family \$600

*See back for work opportunities.

Non-Rider \$15.00

If Working Member dues are paid before APRIL 1ST, pay the Early Bird rate of \$40 Single/\$80 Family

Date: _____

Amt. Paid \$ _____

Check # _____

Circle KD Rules Regarding Participants Under 18 Years Old (Minor)

Children cannot be left unattended. Participants under the age of 18 years old are required to have a parent or legal guardian present at all activities, in the event that the parent or legal guardian is unavailable, the parent or legal guardian must have designated another adult (age 18 years old or older) responsible to make decisions on behalf of that minor participant. The person designated by the parent or legal guardian of the minor must be listed in the Authorization box. This is required in the event of emergency.

Continued on the Back

Important General Information:

1. Riders ride at their own risk.
2. By signing this form, you are agreeing to allow Circle KD to use any pictures taken at a Circle KD event to be used either in print or on the Internet to advertise and help promote Circle KD Trailriders Club (website and Facebook, amongst some possible other sites.)
3. All Circle K-D rules must be followed. The Rules and Regulations & By-Laws will be provided to all new members. Rules & Regulations are also found on our website, www.circlekd.com.
4. Circle K-D members will be assigned a Director for the year.
5. Proof of current negative Coggins is required for all horses on our grounds for all activities. No exceptions.

Equine Activity Liability Act:

Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss or damage to person or property resulting from the risk of Equine activities. **Release:** I acknowledge that I, the Participant, Parent or Legal Guardian, participate in this event totally at my own risk for injuries or property damage I or my family or guest may incur and I acknowledge that I hereby release and hold harmless Circle K-D Trailriders, their officers, directors, members, sponsors and/or co-sponsors as well as any affiliated organizations and others acting on its behalf from any claim, legal liability, legal action or right of damages from any accident which may occur to me, my family and my equine and/or canine animal(s). I also assume and accept full responsibility for any damages done by me, my family and my equine and/or canine animal(s) while participating in this event or being present on these facilities. I have been provided the Circle K-D Rules and Regulations and understand the requirements for membership may including working requirements. I have read and understand these rules and the Equine Activity Liability Act.

Work Opportunities for Working Memberships:

Each individual membership must earn 5 work credits, each family membership must earn 10 work credits. Work credits can be earned as follows:

- One playnight: 1 work credit
- Half day of a show (4 consecutive hours): 1 work credit
- Full day of a show (8 consecutive hours): 2 work credits
- Cleanup: 1 work credit per 4 hours worked
- NIO (Northern Illinois Outlaws - Mounted Shooters) event: 1 work credit per 4 hours worked
- Obtain a sponsor: Walk Level: 1 work credit, Trot Level: 2 work credits, Canter Level: 3 work credits
- Grounds maintenance: 1 work credit for every 4 hours worked
- Serve as an Officer: 3 work credits
- Serve as a Director: 1 work credit to attend meetings, then 1 work credit for each playnight they direct

These work opportunities are designed to be flexible and inclusive of people at all stages of life and careers. Members desiring to join in future years but have not completed their work credits will be charged an additional \$40 per work credit not completed at the beginning of the following year. For example, an individual pays \$40 early bird dues, then only earns 1 work credit: If they want to sign up again the following year, their dues are \$200. \$40 is the base membership dues, plus \$160 for work credits they didn't earn.

At the beginning of the season, you will be notified by email (unless requested otherwise) who your director is along with their contact information and designated play nights. They'll contact you to confirm which of their play nights you will work. If you pick dates that later need to be changed, it's your responsibility to notify your director. Feel free to contact your director with any questions and they'll be happy to help! If you already know what dates you'd like to work or would like to request a specific director, please email our team at circlekd@hotmail.com

I, the undersigned participant, parent, or legal guardian have read and understand this Membership Form in its entirety. I also acknowledge that I have received and agree to abide by the Rules and Regulations of Circle KD Trailriders as well as the above Equine Activity Liability Act and Release.

Signature of applicant (if minor, must have parent or guardian signature)

Date

Please send completed form and payment to: Emma Valerius, 1741 Seaman Ave., DeKalb, IL 60115