

# 2024 Rainbow Saddle Club Membership (Jan. 1<sup>st</sup> - Dec. 31<sup>st</sup>)

New member \_\_\_\_\_

Renewal \_\_\_\_\_

**(Must submit form at a meeting or have a current RSC member sponsorship)**

Please Print Clearly

Family Name: Last: \_\_\_\_\_ First: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ MN, Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Your monthly newsletter will come by the above email, please print clearly and update the secretary of any changes.

**Please complete portion below:**

**List all included family members, First (and Last name if different), Date of birth with year, age group as of January 1st:**

First name	Date of birth	10 & under	11-13	14-17	18 – 34	35 & over

Membership Rates:

\_\_\_\_\_ \$45 Family (max. two adult heads of household (18 & over, 2 votes) & dependants 17 & under)

\_\_\_\_\_ \$25 Single (one 18 & over, 1 vote)

\_\_\_\_\_ \$20 Youth (one 17 & under, no vote)

**Each Active Membership is required to fulfill a minimum of 10 work hours at Open shows/events and/or arena/grounds maintenance, and attending at least 3 general meetings.** Parents are to assist young children in fulfilling these requirements. Work hours may be donated to another membership by BOD approval.

\*\*\*Non-compliance within the above requirements may result in forfeit of year-end awards and/or membership change\*\*\*.

Nomination of each horse & rider are required for Rainbow Award Programs. Please inquire. Initial the box to acknowledge nomination information on separate forms.

We/I do not hold Rainbow Saddle Club responsible for damage, injury or loss of property. We/I understand that we/I must be a member of RSC prior to May 15 in order to be included on RSC's WSCA membership list. Any exceptions past this date will be at member expense.

We/I understand this entitles **only** the individuals listed above to ride at RSC grounds and agree to respect the property and rules stated in attached notice.

We/I understand RSC has the right to utilize security cameras on RSC property.

Fees paid are non refundable.

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

(Signature required by parent/guardian for a minor 17& under)

OFFICE USE ONLY:

Paid: Check# \_\_\_\_\_ Cash \_\_\_\_\_

Gate Lock Combination # \_\_\_\_\_