



TIE DOWN CANADA
2012
MEMBERSHIP APPLICATION

Mailing Address

Box 20, Site 1, R.R. 2, Okotoks, AB T1S 1A2
Tel: 403-995-0460 Fax: 403-938-1653
www.tiedowncanada.com

Name: _____ Date Purchased: _____
Address: _____ Prov/State: _____
Town/City: _____ Postal/Zip: _____
Telephone: () _____ Fax: _____
Cell: () _____ Work: _____
Birth Date: _____
 Month Date Year Email: _____

\$ _____ **FULL ADULT MEMBERSHIP: \$150.00**
For ropers 18 years of age and up as of January 1, 2012.

\$ _____ **YOUTH MEMBERSHIP: \$100.00**
For ropers 17 years of age and under as of January 1, 2012

\$ _____ **SENIOR (60+) MEMBERSHIP: \$100.00**
For ropers 60 years or older as of January 1, 2012.

*** PLEASE CHECK CURRENT CARDS HELD (MUST BE COMPLETED)**

<input type="checkbox"/> CPRA-PERMIT	<input type="checkbox"/> CPRA-SEMI PRO
<input type="checkbox"/> FCA	<input type="checkbox"/> CARA
<input type="checkbox"/> CRA	<input type="checkbox"/> CCA
<input type="checkbox"/> LRA	<input type="checkbox"/> HIGH SCHOOL RODEO
<input type="checkbox"/> WRA	<input type="checkbox"/> OTHER (SPECIFY)

Important Notices:

- Membership cards must be purchased prior to roping to qualify for Added Money and Hi-Point Prizes
- Photographs taken at TDC events may be used for promotional purposes and are the property of TDC
- TDC reserves the right to adjust any ropers handicap at any given time

\$ _____ **TOTAL** ☐ Cash ☐ Cheque Chq # _____

Roper's Signature _____

TDC Office Use

Amount Received	\$ _____
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**Participant's Release and Waiver of Liability,
Assumption of Risk, and Indemnity Agreement
Tie Down Canada (TDC)**

BY SIGNING THIS AGREEMENT, YOU ARE GIVING UP CERTAIN LEGAL RIGHTS, INCLUDING THE RIGHT TO RECOVER DAMAGES IN THE CASE OF INJURY, DEATH OR PROPERTY DAMAGE. READ THIS AGREEMENT CAREFULLY BEFORE SIGNING IT. YOUR SIGNATURE INDICATES YOUR UNDERSTANDING AND AGREEMENT OF ITS TERMS. This is an agreement between the Undersigned (or minor in my charge) and Tie Down Canada.

I, _____, (hereinafter the "Undersigned") on behalf of myself, my personal representatives, heirs, next-of-kin, spouse and assigns HEREBY:

1. Acknowledge that horseback riding and tie down roping is a dangerous activity and involves RISKS that may cause SERIOUS INJURY AND IN SOME CASES DEATH, because of the unpredictable nature and irrational behavior of horses, regardless of their training and past performance.

2. Knowing these facts and in consideration of your acceptance of this form, I voluntarily assume the risk and danger of injury or death inherent in horseback riding and roping activities. I hereby **RELEASE, DISCHARGE AND PROMISE NOT TO SUE** Tie Down Canada, doing business under its own name or any other name and/or any of its owners, officers, employees, agents, volunteers, sponsors and sanctioning organizations (hereinafter the "Releasees"), for any loss, liability, damage, or cost whatsoever arising out of or related to any loss, damage, or injury (including death) to my person or property.

3. Release the Releasees from any claim that such Releasees are or may be negligent in connection with my riding experience or ability including but not limited to training or selecting horses, maintenance, care, fit or adjustment of saddles or bridles, instruction on riding skills or supervising riding activities.

4. **INDEMNIFY, AND SAVE AND HOLD HARMLESS Tie Down Canada** and its employees and agents from and against any loss, liability, damage or cost they may incur arising out of or in any way connected with any event, my use of a horse and any equipment or provided therewith or any acts or omissions of employees or agents.

5. Agree to abide by and follow any instructions given or rules established by Tie Down Canada or any of its employees, agents or volunteers with regard to my participation in any event, use of a horse or any equipment or gear provided therewith.

6. The Undersigned expressly agrees that the forgoing release and waiver of liability, assumption of risk, and indemnity agreement is governed by the Province where the event is taking place, and is intended to be as broad and inclusive as is permitted by law, and that in the event any portion of this Agreement is determined to be invalid, illegal, or unenforceable, the validity, legality and enforceability of the balance of the Agreement shall not be affected or impaired in any way and shall continue in full legal force and effect.

I HAVE READ THIS DOCUMENT. I UNDERSTAND IT IS A PROMISE NOT TO SUE AND A RELEASE AND INDEMNITY FOR ALL CLAIMS.

PARTICIPANT SIGNATURE: _____ **DATE** _____

SIGNATURE OF PARENT OR GUARDIAN OF MINOR: _____ **DATE** _____