

**Membership Application
Release of Liability**



**www.sfmustangs.com
PLEASE PRINT**

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (include area code): Home _____ Mobile _____

Work _____ Fax _____ Other _____

Email: _____ Additional: _____

Do you wish to be included in all club emails? : Yes ___ No ___ If not, monthly meeting minutes only?: Yes___ No___

Membership type*: **Individual (\$20.00 / year)** **Family (\$25.00 / year)**

Amount enclosed / attached: _____ Check one: Cash Check # _____

List all adult names on membership (along with birthday):

1. _____ Birthday: _____

2. _____ Birthday: _____

List all adult children (over 18 years of age) and date of birth:

1. _____ DOB: _____

2. _____ DOB: _____

List all minor children (under age of 18) and date of birth:

1. _____ DOB: _____

2. _____ DOB: _____

3. _____ DOB: _____

4. _____ DOB: _____

Other (relationship and age): _____

What type of club activities are you interested in (beach or trail rides, desensitizing clinics, campouts, cook-outs, drill team, other): _____

How did you hear about our club: _____

Number of horses in your family: _____ Breed(s): _____

South Florida Mustang Guidelines:

- **All participants in club organized events must be a member of the South Florida Mustang Club. No exceptions.**
- Beach ride rules must be strictly adhered to. Rules will be sent out with each scheduled ride and designated trail boss will be in possession of the beach permit.
- Board elections: Nominations are taken in February / Voting in March.
- The South Florida Mustang Club By-Laws are attached as part of this application. Copy can also be found on the South Florida Mustang Club Official Website: www.sfmustangs.com. **By signing below, I (we) acknowledge receipt of the club's by-laws.**
- It is expressly understood that my/our name(s) and /or photo(s) may be used on the SFM Club's website and / or any public media that may be generated by one of our club activities. Initial here if you do not agree to this: _____.

Anyone 18 years of age or older must sign the application.

PLEASE READ CAREFULLY BEFORE SIGNING:

The South Florida Mustang Club does not guarantee your safety. Under Florida law, an equine activity sponsor or equine professional is not liable for injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities. (Florida Statutes 773.01-773.05)

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

*** Annual renewal date is October 1st of each year.**

Any new memberships received within six months of renewal date, will pay one half of the annual dues.

Please mail your application package to (or call):

Virginia Malkemes
SFM - Membership Secretary
P. O. Box 142
Loxahatchee, FL 33470
Phone: 561.252.5562
Email: Virginia34@aol.com