

ASCENSION EQUESTRIAN INC

2009 Associate Membership Application

___ **\$40.00** Single Membership (Must be 18 or older) ___ **\$80.00** Family Membership (See rulebook)

Date: _____ Email: _____

Name: _____ Phone #: _____

Address: _____

Name of all Family Members Applying For Membership	Age of Persons Younger than 18 as of January 1 st	Please check one for each family member	
		Will Ride on Friday Nights	Observer – Doesn't Ride at this Time

I (We) understand that if accepted as a member(s) of A.E.I., I (We) will be required to abide by all Rules, Regulations and By-laws of the club as set forth by the Board of Directors. I (We) have received and read a copy of the current rulebook. I (We) also understand that any club activities or use of the facilities will be at my (our) own risk. I (We) also understand that A.E.I. reserves the right to reject any application at the discretion of the Board of Directors.

WARNING

Under Louisiana law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to R.S. 9:2795.1.

Signed: _____