

March 2006



Riders For Christ, Arizona EMI Equestrian Ministries International

Riders For Christ, Arizona, Equestrian Ministries International
Membership Application Form

Name _____ Month of Birth _____

Address _____ City _____ Zip Code _____

E-Mail Address _____

Home Phone _____ New Member _____ Renewal _____

(If completing for family, note that only immediate family members living in the same household qualify for family status. Include both riding and non-riding members.)

NAME	RELATIONSHIP	AGE (if under 16)	Month of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Additional Information

Area of interest in horse industry: _____

Area of interest in Equestrian Ministries: _____

Are you a Bible believing Christian? ____ Church presently attending: _____

A donation of \$36 provides you and your immediate family members one year membership in **Rider For Christ, AZEMI and Equestrian Ministries International**. Please make your check payable to **Riders For Christ**, and mail it to **Riders For Christ, 32253 E Happy Jack Trail, Black Canyon City, AZ 85324**.

Inherent Risks: I understand that there are inherent risks involved in horseback riding, and horse related activities. I am fully cognizant of the risks and dangers and have been informed of known special hazards of such activity. Therefore, I assume full responsibility for myself, including my minor children, if any, for bodily injury, death and loss of personal property and expenses thereof as a result of those inherent risks and dangers, both identified and not specifically identified, and of my negligence in participating in horseback riding and/or horse related activities. My participation in any and all activities sponsored or promoted by **Rider for Christ AZEMI** is purely voluntary, and I elect to participate in spite of the risks. I have read, understand and accept these terms and conditions, as is evidenced by my signature below.

Your signature below entitles you to all rights as a ministry member and signifies your agreement to abide by all rules and regulations set forth by the ministry.

Signature _____ Date _____

Signature _____ Date _____