

Gallatin Valley Back Country Horsemen Post Office Box 3232, Bozeman, Montana 59772-3232

MEMBERS	SHIP APPLICATION	AND ASSUMPTION	ON OF RISK	
Name		Spouse's Name		
Mailing Address				
•		\$45 Fami	ly Membership	
		\$35 Indiv	idual Membership	
		\$35 Asso	ciate Membership	
Phone #		E-Mail		
			(Please print clearly)	
to a jury trial to hold the prov the sport or recreational oppo	also recognize that the Gallat he conditions of trails or expe ntry Horsemen functions. By rider legally responsible for ortunity or for any injuries of the provider's failure to e	in Valley Back Country Ho rience of the riders or horse signing this document you any injuries or damages re damages you may suffer xercise reasonable care. T	rsemen officers, directors, or s taking part in trail rides or a may be waiving the legal right esulting from risks inherent in due to the provider's ordinary herefore, I do hereby release the	
Signature	Date	Signature	Date	
Please check any committee(s Social Activities Tra Planning Clin	il Rides Issues	Fund Raising Nev	vsletter Projects ve on Board Refreshments	

Name of the advertisement or person that introduced you to the Back Country Horsemen?

What skill, talent or resource are you willing to share with the club?