

# SANTA YNEZ VALLEY EQUESTRIAN ASSOCIATION

It is our mission to provide a multi-use facility for equine activities with accompanying educational experiences in order to foster safe and humane horsemanship. Our goal is to develop, maintain and operate our equestrian facility in a manner that preserves and enriches our community's equestrian lifestyle including youth and therapeutic riding. The center is envisioned as a resource that will attract quality equestrian events and innovative instruction to improve that special relationship between horse and human.

## 2012 MEMBERSHIP APPLICATION

*Valid through December 31<sup>st</sup>, 2012*

- New  
 Renewal # \_\_\_\_\_

### Member Information:

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Cell Number: ( ) \_\_\_\_\_

Email: \_\_\_\_\_

### Memberships:

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Lifetime</b> - \$1000/One-Time Payment                             | <input type="checkbox"/> <b>Competition Only</b> - \$50/Per Year/Per Person<br>(no center use other than events. Points will count towards year end awards) |
| <input type="checkbox"/> <b>Individual</b> \$125/Per Year                                      |   |
| <input type="checkbox"/> <b>Family</b> - \$175/Per Year (children 18 & under)                  | <input type="checkbox"/> <b>Sustaining</b> - \$50/Per Year (non-riding member) invited to all social events and have no voting rights                       |
| <input type="checkbox"/> <b>Junior</b> - \$50/Per Year (18 & under as of Jan 1 <sup>st</sup> ) |   |

\$\_\_\_\_\_ Additional Donation (SYVEA is a 501(c)3 Non Profit, all donations are tax deductible FEIN #77-0399307)

Total \$\_\_\_\_\_ Please make checks payable to: SYVEA

Spouse (or parent name if a Junior): \_\_\_\_\_

Children: Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

**I have read, agreed to, and signed the release on back:**      *please initial*

**Please mail to: SYVEA, PO BOX 207, Santa Ynez, CA 93460**

SYVEA Center Address: 195 N. Refugio Road, Santa Ynez, CA  
[www.syvea.org](http://www.syvea.org)

*Santa Ynez Valley Equestrian Association  
Release, Waiver, and Hold Harmless Agreement*

I am aware and fully understand that horses can be dangerous and unpredictable animals. I realize that participants and even spectators attending equestrian activities and events place themselves in a potentially hazardous environment that poses a substantial risk of injury to persons and property, and that occasionally serious injury or even death to riders, horse-handlers, spectators, and horses occurs. Nevertheless, by signing this agreement, I hereby, knowingly and voluntarily, with full appreciation for the danger assume all risks of injury to my person, my children, my horse(s), and my property, no matter how catastrophic and no matter the cause, which may occur as a result of my use or my child's use of the Santa Ynez Valley Equestrian Association's ("Association") property, facilities, and equipment, for any purpose, and/or my participation or attendance at, or my child's participation in or attendance at, any Association activity or event.

In consideration for allowing me to use the Association's property and facilities, and for allowing me to participate and/or be a spectator at Association activities and events, on behalf of myself, my legal representatives, heirs, assigns, and estate, I hereby release and hold harmless (agree not to make a claim against or sue) the Association, its officers, directors, employees, and agents (collectively referred to hereinafter as "Association"), the owner(s) of the property at which Association activities of events are conducted, and/or the operators of Association activities or events, and their respective employees, agents, and assigns, from any and all duty, liability, and responsibility to me and my children, our legal representatives, heirs, assigns, and estate, that may arise from any accident, damage, injury, or illness to me, my children, my horse(s), or my property, as a result of my use of the Association's property, facilities, or equipment, and/or my participation in or attendance at, or my child's participation in or attendance at, equestrian activities or events, including, but not limited to, any and all damage, injury, or illness to me, my children, my horse(s), or my property, that may arise from the negligent acts or omissions (whether active and/or passive) of the Association and the operators of its activities of events.

In accordance with *California Civil Code section 1668*, this release of liability does not exempt the Association from responsibility for any fraud, or willful injury to the person or property of another, or from any violation of the law.

I further agree to defend, indemnify, and hold harmless the Association, the property owners and operators of its events, their employees, agents and assigns, against all claims, demands, and causes of action (which includes court costs and attorney's fees), brought by or prosecuted for my benefit or that of my children (i.e., pay any loss or damage that they may incur including attorney's fees and costs).

I agree that the release extends to all claims of every kind and nature whatsoever known or unknown, foreseen or unforeseen, and expressly waive any benefits of *California Code 1542*, which states:

**A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS WHICH THE CREDITOR DOES NOT KNOW OR SUSPECT TO EXIST IN HIS FAVOR AT THE TIME OF EXECUTING THE RELEASE, WHICH IF KNOWN BY HIM MUST HAVE MATERIALLY AFFECTED HIS SETTLEMENT WITH THE DEBTOR.**

I understand and acknowledge that the significance and consequence of this waiver of *California Civil Code section 1542* is that even if me, my child, my horse, or my property is injured, damaged, or becomes ill, I, and my legal representatives, heirs, assigns, and estate will not be able to make any claims for those damages.

By signing this release, I hereby grant the Association, the operators of its activities and events, their employees, agents, and assigns my permission to initiate emergency first aid treatment for myself and/or my children in the event such treatment is reasonably required, which determination may be made at their sole discretion.

I further agree and understand that this Agreement is intended to be as broad and inclusive as permitted by the laws of the State of California, and that if any portion of this Agreement is held invalid, then it is agreed that the remainder of this agreement shall continue in full force and affect.

**I have carefully read this Agreement, fully understand its contents, and agree to each statement set forth herein. I am aware that this is a release of liability and a contract between myself and the Santa Ynez Valley Equestrian Association, and sign it of my own free will.**

(All members and/or participants who are 18 years of age or older must sign this Release. In addition, a parent or legal guardian must sign this Release on behalf of any members or participants under 18 years of age).

Dated: \_\_\_\_\_

MEMBER #1 and/or PARTICIPANT

MEMBER #2 and/or PARTICIPANT

(Signature) \_\_\_\_\_

(Signature) \_\_\_\_\_

(Print Name) \_\_\_\_\_

(Print Name) \_\_\_\_\_

On behalf of self and as parent of legal guardian of:

On behalf of self and as parent of legal guardian of:

\_\_\_\_\_

\_\_\_\_\_