



Please mail completed form to:
5807 Pepperport Lane
Flower Mound Texas 75022
or
email scanned form to:
sheri@pepperportfarm.com

NTHJC Member Registration (please register person you wish to receive NTHJC points)

Name: _____

Mailing Address: _____ City: _____

State: _____ Zip: _____ Barn Affiliation: _____

Home Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

All NTHJC information is sent by email--please write email address clearly!!

Please check your membership selection. Membership includes registration for equitation points.

- Sr. Individual (w/voting privileges); \$40
Jr. Individual (non-voting); \$40
Family; \$70
Lifetime Individual; \$350
*Permanent Barn; \$100

*Permanent barn memberships require annual registration, but no fee payment after the first year.

Rider's Name(s): 1. _____ DOB if under 18 _____
2. _____ DOB if under 18 _____
3. _____ DOB if under 18 _____

Membership Registration Total \$ _____

Junior Members: Please sign me up for the Youth Leadership Committee!

Email Address: _____ Age under 12 _____ Age 12 and over _____

Horse registration is no longer required by NTHJC and points will accumulate for year end awards as long as a horse is ridden by a current NTHJC member. NO COGGIN'S INFORMATION WILL BE KEPT ON FILE BY NTHJC, and riders must provide current Coggin's information to each show entered.

The NTHJC Rule Book is available on the website, www.nthjc.com.

RIDER / PARENT/ GUARDIAN RELEASE AGREEMENT

The Sponsors, facility providers, organizers and beneficiaries are hereinafter referred to as Equine Activity Sponsors. The Equine Activity Sponsors, their officers, members, employees, and agents will not be responsible for any damages to person, animal, or property at the show or in the grounds, nor will they be responsible for any property lost or destroyed.

WARNING: UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN 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.

In exchange for the use of property owned by the Facility Providers and other valuable consideration, I agree that my use of the premises and any animals, facilities, or equipment owned by the Facility Provider is at my own risk. I further agree to indemnify and hold harmless the Equine Activity Sponsors, the Facility Providers, and the Beneficiaries, their officers, members, employees and agents from any and all suits, actions, or claims of any type arising from my use of the premises or the participation in the equine activity or such use by my guest, whether such claims result from the act or omissions of the indemnified parties or otherwise.

I acknowledge that riding and involvement with horses is a high-risk activity. I have read this agreement and fully understand its content.

DATE: _____ SIGNATURE OF RIDER/PARENT/GUARDIAN: _____