

## **Membership Application & Liability Release**

\_\_ Cloud Peak BCH \_\_Mountain Man
To join, please check one Chapter above.

Name(s)		
Membership Type: Single (\$30)	Family (\$45)	(Please list all participating family members)
Mailing Address:		
Email Address:		
Telephone #		Additional Phone #
Comments:		
individual rider is liable for any dama In consideration for the privi sponsored trail rides, I (We) hereby r guests, or to our horses, which might and the landowners (including the U As a member of the (Chapter	riges, including death, wo lege of riding with the ( release and immunize f t attach as a result of, con nited States Governme r)BCH*, I (	n this state does so at his or her own risk and that the which might occur on, or arising from, the ride.  (Chapter)Back Country Horsemen on one of its rom any liability for damages to me, to my children, to my or in connection with, that ride both (Chapter)BChnt) through whose property we may be riding.  We) explicitly acknowledge that this Release is effective any rides I might take with the BCH* once my membership
Signature - Guardian must sign for Children under 18 yrs.		Date
Signature		
Signature		
· · · · · · · · · · · · · · · · · · ·	ssly defined to include to sofficers, directors an	the Wyoming Backcountry Horsemen as well as its (Chapter) d members.
Please make checks to (Chapter)	BCH. Mail to spe	cific Chapter Treasurer listed on web page.