

NO-ON MEMBERSHIP APPLICATION

Come Join Us!

To join BCHW, complete this application, sign the liability release (all members **18 and over**), and enclose payment:

- **Chapter members**, turn application and payment in *to your Chapter Treasurer*. If paying by check, make it out **to your chapter**.
- **Independent members** (folks who are **not** joining a chapter), make check out to "BCHW", and mail application and payment to: BCHW, ATTN: MEMBERSHIP, PO Box 1132, Ellensburg, WA 98926-1132.



Member Info

New Member Renewal – Membership number(s): _____

Adult's name(s): _____

Children's name(s): _____

Mailing Address: _____

City: _____ ST: _____ Zip: _____

Phone number: _____ E-mail: _____

Legislative district (if known): _____ County: _____

Check to **opt out** of mailed (hardcopy) newsletter: BCHW (Trailhead News) Chapter

STATE MEMBERSHIP

Basic Membership

- Single \$41.00
 Family \$54.00

Optional Membership *(includes family or single from above)*

- Contributing \$75.00
 Sustaining \$125.00
 Patron \$250.00
 Benefactor \$500.00
 Lifetime (Single) \$1200.00

State dues paid online (attach receipt copy)
 Additional State Donation \$ _____
State Subtotal \$ _____

CHAPTER MEMBERSHIP

All chapter members must also be a member of BCHW. However, BCHW dues only need to be paid **once** each year. Joining additional (secondary) chapters only requires paying chapter dues.

Chapter Name (or Independent): _____

If joining a secondary Chapter, provide the Chapter name where BCHW dues have been paid for 2018: _____

Chapter Dues	\$
Additional Chapter Donation	\$
<i>Chapter Subtotal</i>	\$
Grand Total (State+Chapter)	\$

LIABILITY RELEASE & NOTICES

All ADULT members MUST sign! Adult's signature covers minor children.

Recognizing the fact that there is a potential for an accident wherever horse use is involved, which can cause injuries to horses, riders, and spectators, and also recognizing the fact that Back Country Horsemen of Washington, including Chapters, officers, directors, or members, cannot always know the condition of trails or the experience levels of riders or horses taking part in trail rides or other BCHW events, I do hereby release and hold harmless the above named from any claim or right for damages which might occur to me, my minor children, or horses.

By signing this application I agree to receive notices from BCHW by electronic transmission at the above email address.

Signature: _____ Date: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

Back Country Horsemen of Washington (BCHW) is a public charity as defined in Internal Revenue Code Section 501(c) (3). Accordingly, membership dues paid to BCHW may be treated as deductions characterized as "charitable contributions" when computing federal and state income tax obligations.