



SADDLE UP NIAGARA

2008 MEMBERSHIP FORM

NAME: _____
Last (Please Print) First

ADDRESS: _____

City Province Postal Code

TELEPHONE: _____ **EMAIL:** _____

MEMBERSHIP REQUESTED: NEW MEMBER _____ RENEWAL _____

FAMILY (\$25.00) _____ SINGLE (\$15.00) _____

NAMES OF FAMILY MEMBERS: (immediate family)

Adult(s) Name: _____

Youth (under the age of 19 at January 1, 2008):

Name: _____ Birthdate: _____
MM/DD/YY

PROOF OF INSURANCE: Please note that all participants in shows or activities of Saddle Up Niagara must show proof of Equine Liability Insurance. Please provide a photocopy of your valid insurance certificate showing the name of the Insurance Company, the Policy Number and the Expiry Date. If you are showing with a barn where you take lessons, please check to see if you are covered under the policy for the barn. For more information on Equine Liability Insurance, you can ask any of the club's Directors.

FOR OFFICE USE ONLY:

Photocopy of Insurance on File: _____
Insurance Certificate seen by: (sign & date) _____
Name of Insurance Company: _____
Policy Number: _____
Expiry Date: _____
Covered under barn insurance for: (name of barn member) _____

Cheques should be made payable to "Saddle Up Niagara"
Mail to: Saddle Up Niagara, 5071 Charles Street, Beamsville, ON L0R 1B7