

ALBERTA TEAM CATTLE PENNING SOCIETY

2017 Membership Application - Everyone must fill out a ATCPS membership form.

Only NEW members with NO previous CTCPA rating need to fill out a CTCPA form

Last Name: _____ First Name(s): _____
 Address: _____
 City/Prov: _____ Postal Code: _____
 Phone: _____ (will be posted on website) Email: _____

RELEASE AND WAIVER

I, the undersigned, acknowledge that the competition through the Alberta Team Cattle Penning Society, involves an inherent risk of injury and accordingly, hereby release the Alberta Team Cattle Penning Society and its officers, members, agents, employees, representatives, or any of them, from all claims, demands, action or cause of action, of any kind or nature whatsoever, whether now known or ascertained, or which may hereafter develop or accrue to me in favor of myself, my heirs, representatives or dependents, on account of, or by property, animate or inanimate, belonging to me or used by me because of any matter, thing or condition, negligence or default, whatsoever, and

I/We hereby assume and accept the full risk of danger or any hurt, injury or damage which may occur through or by an reason or matter, thing or condition, negligence, or default, or any person whatsoever. Some or all of such information as members name, phone #, rating, points or dollars earned, photographs or video and print references may be disclosed on the ATCPS or CTCPA or CTCPA affiliated sites. All or some of this information may be also be used for promotional purposes, as well as being released to newspapers, radio and television stations, magazines and through press releases. **It is mandatory of all riders to wear helmets who are Minors in the Province of Alberta (under the age of 18 years as defined by the Alberta Age of Majority Act)**

DATE: _____ MEMBER'S SIGNATURE: _____
 (after having read the above "Release and Waiver")
 DATE: _____ MEMBER'S SIGNATURE: _____
 (after having read the above "Release and Waiver")

PARENT/GUARDIAN (FOR YOUTH MEMBERS ONLY)

SIGNATURE: _____ on behalf of: _____
 (after having read the above "Release and Waiver") Youth Rider Name _____
 Date: _____

Please fill in quantity with number of memberships:

Quantity	Cost	Membership Type	Total
	\$37.00	Associate Membership - for non-riding members. Includes \$24 membership and \$13 insurance.	
	\$77.00	Judges Membership (non-riding members) Includes \$24 membership, \$13 insurance and \$40 CTCPA fee	
	\$100.00	Adult Individual Membership. Includes \$47 membership \$13 rider insurance, and \$40 CTCPA fee.	
	\$25.00	Weekend pass (applicable to 1 weekend only). Rider must be a current member of the CTCPA.	
	\$23.00	Senior Youth Individual Membership (13-16 years old as of January 1/17) (\$47 membership is free), \$13 rider insurance and \$10 CTCPA fee. ** Please list all youth birth dates below!	
	\$13.00	Junior Youth Individual Membership (under 12 years of age as of January 1/17) (\$47 membership is free), \$13 rider insurance. CTCPA registration is free.	
	\$30.00	Mandatory Adult Work Levy Fee - Non Refundable	
	\$50.00	Late Fee if Application Postmarked after March 15, 2017 - \$50.00/individual **(Applicable to Associate and Adult Individual Memberships only)	
TOTAL			

Youth Birthdate(s):
 Name _____ Birthdate: _____
 Name _____ Birthdate: _____

RETURN THIS MEMBERSHIP FORM, CTCPA FORM (if applicable) and ALL FEES (ATCPS & CTCPA) TO:

ATCPS, c/o Brenda Gilbert, 121-52061 Rge. Rd. 215, Sherwood Park, AB T8E 1B2

ALL CHEQUES ARE TO BE MADE PAYABLE TO THE ATCPS