

**AMERICAN POLOCROSSE ASSOCIATION**  
**Membership Form 2009**

**Please complete clearly below: (All information will be sent to first name that appears on form)**

Name: \_\_\_\_\_ APA Club Affiliation \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Fax # \_\_\_\_\_

Player \_\_\_\_\_ Non-player \_\_\_\_\_ Email Address: \_\_\_\_\_

**Family Membership:**(please list spouse and/or children 17 and under with Birth Date) \_\_\_\_\_

All memberships end on December 31<sup>st</sup> of each year and **renewals are due at the APA office between January 1<sup>st</sup> and January 31<sup>st</sup>**. After January 31<sup>st</sup>, there will be a 20% penalty late fee for renewing members. This is to encourage early membership renewal and help the administrative process. New membership fees are pro-rated after October 1<sup>st</sup> to \$22.50 for Family; \$15.00 for Senior; \$7.50 for Junior.

<input type="checkbox"/> Renewal (late fee after Jan 31 <sup>st</sup> )	<input type="checkbox"/> New Member (no late fee ever)	<input type="checkbox"/> Are you a Pony Club or 4-H Member?
<input type="checkbox"/> Family	(child 18 yrs. not included)... \$90.00	Yearly fees... <u>after January 31<sup>st</sup> renewal is \$108.00</u>
<input type="checkbox"/> Individual	(18 yrs. and older)..... \$60.00	Yearly fees... <u>after January 31<sup>st</sup> renewal is \$72.00</u>
<input type="checkbox"/> Junior	(17 yrs. and under)..... \$30.00	Yearly fees... <u>after January 31<sup>st</sup>, renewal is \$36.00</u>
<input type="checkbox"/> Associate	(newsletter only)..... \$30.00	Yearly charge
<input type="checkbox"/> Day Member	(no full membership benefits) \$20.00	Allowed for one tournament per year

Add'l Contributions to APA approved funds: Name of Fund \_\_\_\_\_ Amount \_\_\_\_\_  
(General Fund, Player Development Program, Coaching, Umpiring, Nationals)

The American Polocrosse Association offers to its membership, newsletters, rulebooks, coaching and umpire certification programs, eligibility to participate as a player in sanctioned tournaments, a general liability insurance policy for members and sanctioned tournaments eligibility to compete in international competitions, and a commitment to promote the American Polocrosse Association.

**I, as a member, agree to abide by the By-Laws, the Code of Conduct and all Rules and Regulations of the American Polocrosse Association. I agree to comply with all State laws pertaining to the possession of distribution of alcohol to minors. Further, I acknowledge that it is my responsibility to comply with all APA rules, including those pertaining to equipment and helmets. The safety of the equipment and the animals that I use is my responsibility.**

**RELEASE OF LIABILITY**

The undersigned states the following: I acknowledge that the game of Polocrosse involves inherent risks of personal injury to me personally, my horse, and damages to equipment and property. Knowing and understanding this, I still desire to participate in and attend APA sanctioned events.

In consideration for my participation in and attendance to these events. I hereby, for myself, my heirs, executors and assigns, discharge and hold harmless; The American Polocrosse Association, the APA Club, its officers, directors, members and agents, and all other persons or organizations in any way connected with this event including, but not limited to properties, their owners and operators, their officers, directors, employees, agents, representatives, heirs, administrators and assigns, from any and all rights, claims or liability for damages from any and all claims of any kind of nature, that might arise out of my participation in any activity in any way connected with this event or taking place upon the grounds.

I further acknowledge that this release will extend to any accidents, damages, or claims arising out of my participation, caused by my own act or the acts of anyone or any animal within my control. I hereby certify that I am covered by medical, health and accident insurance and/or I am responsible for any costs I may incur for my own medical injuries.

By signing this release and waiver, I am assuming all risks of this activity in which I will be engaged and am releasing all of the parties indicated above of any and all liability for their negligence of any description whatsoever. It is my intent to assume all risk and to waive and give up my rights (for myself and my heirs) to sue. And I do so knowingly and voluntarily.  
**Parent or Guardian Release and Waiver** (Please list all minor members, in space below, whether player or non-player)

I am the parent/guardian of \_\_\_\_\_,  
a minor, and on the minor's behalf, and on the behalf of all other parents and guardians, I accept the release and waiver of liability above as an inducement for allowing my child to participate in polocrosse games, practices and related activities. I further authorize any emergency medical care which may be necessary.

**NEW:**

**Want to be green? The newsletter can be found on our website if you *don't* want it mailed to you. Check here if you DO want it mailed:** \_\_\_\_\_

Signature For Release of Liability \_\_\_\_\_ Date \_\_\_\_\_

Send To Our APA Address: APA; P.O. Box 158; Bonneau, SC 29431

Questions? Contact Laura Humphreys, APA Secretary  
[lhumphreys@americanpolocrosse.org](mailto:lhumphreys@americanpolocrosse.org)

