



Cowboy Mounted Shooting Association
 PO Box 1529
 Columbia, TN 38402-1529
 1-888-960-0003 Fax (931) 388-3564
 www.cmsaevents.com

(This section for Club Office use only)

CMSA CLUB MEMBERSHIP DUES

Club Code: _____ **Club Name:** _____

- CMSA Individual Membership includes:** Competition Card, Decal, Riders Rulebook, 1-year subscription to the "CMSA Rundown" Newspaper and Points Tracking Services. (CMSA fee \$60.00) \$ _____
Including Local Dues
- CMSA Family Membership includes:** CMSA Cardholders living in one household will receive a Decal & Competition Card, Points Tracking Services, one Riders Rulebook & one "CMSA Rundown" Newspaper per household. (CMSA fee \$90.00) \$ _____
Including Local Dues
- Associate Membership includes:** Non-competing Associate cardholder will receive an Associate Card, a 1-year subscription to the "CMSA Rundown" Newspaper and Decal. (CMSA fee \$25) \$ _____
Including Local Dues

ALL INFORMATION REQUIRED: New / Renewal CMSA# _____ Level _____

Name _____ Date of Birth _____ Male / Female

Address _____ City _____ State _____ Zip _____

Daytime Phone (_____) _____ E-Mail Address _____

New / Renewal CMSA# _____ Level _____ Date of Birth _____ Male / Female

Name _____ E-Mail Address _____

New / Renewal CMSA# _____ Level _____ Date of Birth _____ Male / Female

Name _____ E-Mail Address _____

New / Renewal CMSA# _____ Level _____ Date of Birth _____ Male / Female

Name _____ E-Mail Address _____

New / Renewal CMSA# _____ Level _____ Date of Birth _____ Male / Female

Name _____ E-Mail Address _____

****SIGN & RETURN COMPLETED FORM TO YOUR CLUB OFFICE ALONG WITH FULL PAYMENT****

I understand that I am participating in a sport, which contains dangers, and risks may arise, including, but not limited to, accidental injury, the forces of nature and illness. In consideration of the right to participate in these events and the services provided for me by the Cowboy Mounted Shooting Association and its agents, I have and do hereby assume the risks associated with such events. The contestant shall at his own expense, defend management and/or all sponsors, their cardholders, or employees from any and all such claims and indemnify, from any and all liability, damage and costs arising from injuries to person or property occasioned by any act or omission of the contestant. By joining CMSA, I am agreeing that images of my horse, equipment and myself may be photographed, videoed or recorded in any way and re-used without my permission and without compensation. I further agree to support and enforce CMSA Rules as stated in the CMSA Rule Book. This Solidarity Agreement binds all CMSA Members to enforce CMSA Rules and assure our competition cardholders they will play the same game coast-to-coast when they travel for CMSA competitions.

 Signature of Applicant Required if over 18 years of age / Date

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