

# Beaver State Can Chasers

P.O. Box 640  
Junction City, OR 97448  
(541) 998-4542

## 2019-2020 Membership Application

Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Social Security # (mandatory): \_\_\_\_\_

Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

☐ General Membership (includes 1 Horse): \$60

☐ Number of Additional Horses \_\_\_\_\_ x \$30 \_\_\_\_\_

TOTAL DUE \$ \_\_\_\_\_

RELEASE: I, the undersigned, agree to release and hold harmless the Beaver State Can Chasers (BSCC), arena owners, operators, producers, and/or any persons, sponsors of affiliations with BSCC approved events from losses, damages, injuries to myself and/or my animal or equipment. I agree to abide by all rules set forth by the BSCC. The BSCC reserves the right to accept or reject any membership or entry.

\*\*NSF Funds will result in a \$50 fine, rider will not be able to participate in any BSCC sanctioned races until cleared and will be placed on a cash only basis for one year!

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

(If applicant is under 18 years of age, release must be signed by a parent or legal guardian)