



Equestrian Center of Walnut Creek Application for Membership

Name: _____ (circle one) Adult/Junior/Family/Club

Family Membership names: _____
(Family membership may only include children under 18 by Jan 1st)

Address: _____

City: _____ Zip: _____ Hm Ph: _____

Cell ph: _____ E-mail: _____

How many horses do you own/lease? _____ Where are they stabled? _____

Do you ride(r)/show(s): English _____ Western _____ Trail _____ Other _____

What other equestrian organizations do you belong to? _____

RELEASE OF LIABILITY IS REQUIRED FROM ALL MEMBERS WHETHER PLANNING TO RIDE AT THE FACILITY OR NOT. IF FAMILY MEMBERSHIP, ALL MEMBERS OF FAMILY MUST BE LISTED AND EACH ADULT SIGNS SEPARATELY, CHILDREN MUST BE <18 YRS

ECWC is an organization that depends on the energies and assistance of volunteers. Our activities include: hosting horse shows/clinics/events, grounds keeping and more! Please indicate where you can help below,
Arena members must work min. 16 hours/yr!

Horse Shows ___ Grounds ___ Snack Shack ___ Membership ___ Advertising ___ Other _____

SOCIAL MEMBERSHIP FEE: Individual Junior (under 18) \$10.00 _____ Individual Senior \$20.00 _____
Family \$30.00 _____ Junior Club * \$40.00 _____ Senior Club * \$50.00 _____ Single Life Membership \$200.00 _____

ARENA USE FEE: \$50.00 _____ **Allows use of arenas when open as posted on website www.ecwc.org**
CONFIRM BEFORE RIDING. Arena use fee is paid in addition to Individual, Family, Club or Life social memberships. An Arena membership also requires:

- 1) Strict compliance with arena rules as posted on website
- 2) 16 hours volunteer work at events, shows, ECWC board meetings etc.

***Clubs joining ECWC must attach a complete address roster of their current members, members can buy individual arena memberships if desired & will have one seat on the Board. Please name representative & provide contact info below:**

Club Representative (print): _____

Email _____ Phone _____

Please mail check payable to ECWC: PO Box 3532 Walnut Creek, CA 94598

ECWC Use: Date Rcvd _____ Amt Rcvd \$ _____ Date forwarded to Secretary/Treasurer _____

◆ Website: www.ecwc.org ◆ Phone: 925-939-2929 ◆