

# SNOHOMISH COUNTY WESTERN GAMES ASSOCIATION

## SCWGA: 2018- 2019 CLUB MEMBERSHIP APPLICATION

**MEMBERS:** Please indicate the job each rider is willing to work at the shows.

**List of jobs:** RAKER ~ JUDGE ~ TIMER ~ IN-GATE ~ ANNOUNCER ~ CALCULATIONS ~ ARENA CREW/SET-UP

Youth through all Senior classes will be required to work at any show they ride at, to be eligible for year end points. *Little Trainer riders are not required to work.* Other family members can work for riders' worker points. Some jobs do require training prior to being allowed to work in the position, such as: announcers, timers, judges, and calculations. Workers sign-up schedules will be available at each show or contact board members listed on the website or in the newsletter. To fulfill worker/rider points you **must ride the majority** of the shows and receive **six (6) worker credits per show/day** to receive year end awards.

Members will receive the club newsletter via the website, [www.scwga.com](http://www.scwga.com). Members acknowledge that all mailing and contact information will be provided to all SCWGA members by distribution of a membership list. SCWGA is not responsible for any purpose in which members may use that contact information, including mass mailings or solicitations.

**Check payable to SCWGA. Family members must have a single address, and can be extended to related minor children living with other family members.** Member's year end points will accumulate beginning on the date membership is received.

**COMPLETE & RETURN THE BOTTOM OF THIS FORM TO THE SHOW OFFICE OR MAIL TO:**  
**SCWGA-membership P O Box 1482 Snohomish, WA 98291-1482**

**Questions: Call Jocelyn Williams or email @ [jocelynt02@hotmail.com](mailto:jocelynt02@hotmail.com)**

Keep the top of this form

✂ \_\_\_\_\_ **CUT HERE** \_\_\_\_\_ **CUT HERE** \_\_\_\_\_

<b>Check type of membership</b>	<b>Individual</b> ___ \$25 or \$30 after fair _____	<b>Family</b> ___ \$35 or \$40 after fair _____		
<b>PLEASE PRINT</b>		<b>Jacket size</b> <small>(please indicate youth or adult)</small>	<b>Horse blanket size</b>	<b>Job for each member</b> <small>(please indicate at least one SEE LIST ABOVE):</small>
<b>Names:</b>	<b>Year Born:</b>			
Mailing Address: _____ _____	Area Code: _____		Phone: _____	
Email address: _____				

PLEASE NAME ONE EMERGENCY CONTACT PERSON:

Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

**WAIVER:** In submitting an entry, the riders and guardians release the Evergreen State Fairgrounds and the Show organizers, SCWGA and its officers, board members et al, from any claim or right for damages which may occur to owners, riders or horses at the Evergreen State Fairgrounds or in transit. PARENT AND/OR ADULT GUARDIAN MUST BE PRESENT AND RESPONSIBLE for all riders under the age of 18. Each rider is responsible for knowing all the rules. Any questions please contact a Board Member and get clarity. Thank you!! **EACH ADULT RIDER MUST SIGN. IF UNDER 18 YEARS OF AGE, A GUARDIAN MUST SIGN**

SIGNATURE \_\_\_\_\_ SIGNATURE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ SIGNATURE \_\_\_\_\_