

AMERICAN ASSOCIATION OF SHERIFF POSSES & RIDING CLUBS  
MEMBERSHIP APPLICATION

**Please Print or Type**

HOME CLUB \_\_\_\_\_

REGION # \_\_\_\_\_ DISTRICT # \_\_\_\_\_

NAME THAT MEMBERSHIP WILL BE IN \_\_\_\_\_

Please fill one line for every member of Family

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

NAME \_\_\_\_\_ DOB \_\_\_\_\_ MALE/FEMALE

Please give all information:

STREET ADDRESS \_\_\_\_\_

CITY, STATE & ZIP CODE \_\_\_\_\_

EMAIL ADDRESS to receive official notifications \_\_\_\_\_

PHONE NUMBER HOME \_\_\_\_\_ CELL \_\_\_\_\_

**CIRCLE TYPE OF MEMBERSHIP THAT APPLIES:**

FIRST TIME FAMILY MEMBERSHIP \$25/YR

RENEWAL FAMILY MEMBERSHIP \$60/YR

**WARNING:**

**UNDER TEXAS LAW (CHAPTER 87, CIVIL PRACTICE AND REMEDIES CODE), AN EQUINE ACTIVITY SPONSOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ACTIVITIES.**

**By signing this application, I understand and take full responsibility for the safety of myself and my family and release the American Association of Sheriff Poses and Riding Clubs from any liability per Texas Law (Chapter 87, Civil Practice and Remedies Code).**

\_\_\_\_\_  
Signature (must be at least 18 years old)

\_\_\_\_\_  
Date

**Submit Membership Form to your District Secretary.**

**\*District Secretaries: Please mail Membership Forms & Fees to:  
Lynn Cox, 10621 FM 455W, Sanger, TX 76266**

## AASP&RC PLAYDAY FINALS STALL AND RV

Please remember, do NOT send requests for stalls and RV spots postmarked PRIOR to April 1<sup>st</sup>

### STALL SPACES REQUEST:

Association Member Name: \_\_\_\_\_

# Stalls Requested \_\_\_\_\_ @ \$25.00 for the week      Total \$ \_\_\_\_\_

1<sup>ST</sup> Choice: Barn \_\_\_\_\_ Stalls \_\_\_\_\_      2<sup>nd</sup> Choice: Barn \_\_\_\_\_ Stalls \_\_\_\_\_

(Note, the office will do it's very best to assign multiple stalls together, but the earlier you submit your request, the more likely we will be able to honor this convenience)

(Note, if you are using another Association Member's stalls, you are still required to pay for using them.)

### RV SPACES REQUESTED

30 Amp spaces - \$20.00 per night # of nights \_\_\_\_\_ Total \$ \_\_\_\_\_

50 Amp Spaces - \$25.00 per night # of nights \_\_\_\_\_ Total \$ \_\_\_\_\_

(The 30 amp spaces are numbered #1-#60 and the 50 amp spaces are #61-#70. We cannot guarantee that the space you request will be available when your information arrives in the office but will do our best to accommodate you)

Total Amount Enclosed \_\_\_\_\_

Make checks payable to: AASP&RC

Please mail registration form and check to:

AASP&RC c/o Lisa McLeroy  
279 Mesa Ridge  
Decatur, TX 76234  
214-226-6641

# 2024 Play Day Finals Entry Form

**Age Divisions: the individual age as of January 1<sup>st</sup>, 2024.**

58 & over Classic | 45 thru 57 Super Seniors | Leadline (assisted) | 0 thru 6 Super Pee Wee

7 thru 10 Pee Wee | 11 thru 15 Junior | 16 thru 24 Intermediate | 25 thru 44 Senior | Novice (all ages)

**\$65 Entry | Leadline \$30 | Novice \$30**

**\*All Entries MUST work! Either Rider (Intermediate thru Classic), Parent, or Individual that knows the Rulebook!**

**\*Each Family must have their own form**

Contestant Name	AGE	F/M	CLASS	Prefer Area to Work: Tractor, Arena, Announcer, Timekeeper	TOTAL
<b>*Each Rider's entry includes a dinner ticket for Friday night.</b> <small>(Novice &amp; Leadline class entries DO NOT include a dinner ticket.)</small>				1 Free Program	\$0.00
# of Child Tickets: _____ # of Adult Tickets: _____ # of Extra Dinner Tickets _____				@ \$20 each	
<b>COGGINS ON ALL HORSES REQUIRED!</b>				GRAND TOTAL	

Work Schedule Notes: