



NORTH AMERICAN SKI JORING ASSOCIATION
1429 King Hill Rd. New London, NH 03257
NASJA MEMBERSHIP FORM 2009

Membership Type: (Please Circle ONE)

\$35.00 Season Membership, NASJA T-shirt, NASJA sticker, E-mail broadcastings and Newsletter (sent via email) and an official NASJA membership card valid through December 1, 2009.

\$15.00 One race weekend at one race venue only and NASJA sticker.

These fees apply to the Open and Sport Divisions only. Competitors must be 16 yrs. old or older. If you are under 18 years of age this form must be signed by your parent or guardian.

Date: _____

First and Last Name: _____

Address: _____ **Date of Birth:** _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Division: Check only one per application Open Sport

Check only one per application Rider Skier

Name of Horse(s) _____

Weekend Race Venue _____

Waiver and Release: By accepting this membership registration form, I fully understand that engaging in the sport of ski joring is a dangerous and unpredictable activity which could result in injury and or death. I waive and release for myself, my heirs, executors and administrators any and all rights or claims for damage which I may have against the North American Ski Joring Association also known as NASJA, its board of directors, members, sponsors, land owners, race directors, volunteers, spectators, municipalities and states which NASJA sanctioned events are held. I verify that I am physically fit and have trained to participate in NASJA sanctioned events. I agree that all decisions and actions I make are my own. I agree to pay for any and all medical expenses which may occur as a result of injury in participation of a NASJA sanctioned event. I agree to allow NASJA officials, race organizers and media representatives the use of my name, photograph, videotape or commentaries that publicize NASJA and the sport of ski joring. NASJA reserves the right to de-sanction any event or revoke the membership of individual in violation of these or any standardized criteria. I understand that my membership fee is non-refundable.

Signature and Date: _____
(Parent or Guardian if under 18 yrs. old)

Print Name: _____

Note: Any information received that is not legible will be disregarded without refund.