

# Southern Trailriders Association (STA) Membership Application/Renewal

Annual Membership for January 1, 2024 through December 31, 2024

**Type of Membership:**

(Please  or  appropriate membership):

Junior Membership (\$15.00)

Individual (\$30.00)

Family (\$45.00)

Business (\$50.00-may include up to 3 named employees)

**Applicant(s) information** (please print):

	Individual or Junior or Business Mbr.	Family or 2 <sup>nd</sup> Business Member	3 <sup>rd</sup> Business Member
Name			
Parent/Legal Guardian Name (for Jr. Membership)			
Address			
City, State, Zip			
Home Phone			
Cell Phone			
Work Phone (if applicable)			
E-mail Address			
Birthday (Month & Day)			

• Please  or  your preference for receiving monthly newsletter:     Email     U.S. Mail

**WARNING:** Under Florida law, an equine activity sponsor or equine professional is not liable for an injury to, or the death of, a participant in equine activities resulting from the inherent risks of equine activities. *Chapter 773 Florida Statutes.*

**NOTICE:** The State of Florida requires all horses at public events to have current Coggins test results in their possession. STA will randomly check Coggins documents at all STA events. If you do not have a current Coggins document with you at a STA event you will be asked to leave.

**Acknowledgement:** I (we), the undersigned, hereby acknowledge that horseback riding is a dangerous sport and I (we) accept the inherent risks involved in this activity in accordance with Chapter 773 Florida Statutes. By signing below, I (we) have read and understand the STA By-Laws and Trail Etiquette Policies, which can be found on the STA website, and will abide by them.

**Note:** Minors are not required to sign application.

	Individual, Family Applicant, Parent or Legal Guardian for Jr. Mbrshp	Other Family Applicant or 2 <sup>nd</sup> Business Applicant	3 <sup>rd</sup> Business Applicant
<b>Signatures:</b>			

Please list names and ages of minor children for a family application (as applicable):

Please submit **signed** application with check, for the appropriate amount, made payable to **Southern Trailriders Association** and mail to:

Southern Trailriders Association, c/o Becky Day  
1130 Robert Thompson Rd, Monticello, FL 32344