

**Westside Team Penning Club
MEMBERSHIP APPLICATION**

Membership Year: _____
Last Name: _____

Member # 1

Name: _____ **Email:** _____

Cell Phone: _____ **Home Phone:** _____

Mailing Address: _____

Member #2

Name: _____ **Email:** _____

Cell Phone: _____

Minor Children

Name: _____ **Name:** _____

- *By checking this box I hereby authorize release of my personal contact information to be used by WTPC for member contact lists and/or to other associations or organizations.*

Membership Dues (per calendar year)

- **Individual \$40.00**
(1 adult at least 18 years old)
- **Youth Only: \$35**
- **Family \$60.00**
(1 or 2 adults living in same household, children must be under 18 years old)

Current WTPC Rating

*If you did not participate in WTPC events last year or have not been previously rated at WTPC please fill out separate rating form

**SSN are required for 1099 forms and will be issued for ALL earnings over \$600 per calendar year.*

Member # 1 SSN: _____ - _____ - _____
Applicant Signature: _____ Date: _____

Member # 2 SSN: _____ - _____ - _____
Applicant Signature: _____ Date: _____

EMERGENCY CONTACT MUST BE COMPLETED***	
NAME: _____	Phone: _____

OFFICE USE ONLY
CIRCLE ONE
PAID VIA ---SQUARE---CASH---CHECK # _____

Mailing To: WTPC ATTN Membership
1051 Bertlesen Rd
Shelton, WA 98584
Email To: WTPCSEC@gmail.com

A WTPC Waiver & Release of Claims Form must be signed for EACH and EVERY Competitor and on file with WTPC before being allowed to compete in any WTPC event.

I, _____, (Print Name Legibly) do hereby state that in consideration for the privilege of competing and/or allowing my/our children to compete in any and all team penning/ranch sorting events during the 2024 season sponsored by WESTSIDE TEAM PENNING CLUB (WTPC), I/We knowingly acknowledge that I/We am/are mindful of the inherent risks and unpredictability involved in the sport of team penning, ranch sorting, riding horses and working cattle. I/We hereby represent that:

1. EXPERIENCE AND ABILITIES OF RIDER(S), ASSUMPTION OF RISK :

- a. I/we am/are experienced horse rider(s) and specifically represent that the horse(s) I/we ride in all WTPC events during this season is/are trained and can handle the stress of chasing wild cattle in a closed arena at a rapid pace. In the event this WAIVER AND RELEASE OF CLAIMS is signed by me/us on behalf of my/our minor children, I/We make same representation on behalf of my/our children and the horse(s) they will be riding in all WTPC competition during this penning/sorting season based on firsthand knowledge.
- b. I/we and the horse(s) I/we am/are riding during all WTPC competitions have team penned/sorted a minimum of five (5) times, or have the equivalent experience such as roping, cutting, cattle ranch work and/or working cow horse competitions and I/we are/am comfortable with my/our horse's ability to team pen/sort safely. In the event this WAIVER AND RELEASE OF CLAIMS is signed on behalf of my/our minor children, I/we represent that my/our children and the horses they ride in all WTPC competitions during this penning/sorting season have penned/sorted a minimum of ten (10) times, or have the equivalent experience as set forth above;
- c. The WTPC has the right to rely on the above representations in determining whether I/we can participate in any WTPC competition during this penning/sorting season; AND
- d. I/we knowingly and fully assume all risks on my/our behalf and on the behalf of my/our children whom I/we consent to participate in any and all WTPC competitions during the penning/sorting season involved with the sport of team penning /ranch sorting to include but not limit to serious bodily injury and/or death.

2. WAIVER AND RELEASE OF CLAIMS :

- a. Based on the above representations, I/we am/are mindful that WTPC may allow me and/or my children to compete in any and all WTPC competitions during the penning/sorting season. As consideration for being allowed to compete in any or all WTPC penning/sorting events during the this season, I/we knowingly hereby WAIVE AND RELEASE any and all claims, including but not limited to any claims based upon NEGLIGENCE WHETHER KNOWN OR UNKNOWN, that I/we and my / children, our executors, heirs, administrators, family members and assigns may have against the WTPC, its officers, agents, members, volunteers, and the Stock-Contractor and/or promoter (hereinafter "RELEASEES"). This includes but is not limited to any and all claims for damages, INCLUDING BUT NOT LIMITED TO DEATH AND SERIOUS BODILY INJURY, to me/us or my/our children, caused by the NEGLIGENCE OR GROSS NEGLIGENCE of any of the above-named RELEASEES arising out of my/our and/or my/our children's participation in any and all WTPC competitions during this penning/sorting season and related activities, together with any cost, medical costs and the like, including legal fees, that may be incurred as a result of any such claims whether valid or not.
- b. I hereby INDEMNIFY, HOLD HARMLESS and RELEASE each of the above RELEASEES against any and all claims that I/we, my/our children or any one or more of my executors, heirs, next of kin, administrators, successors, and/or assigns may have or assert against the WTPC, it's agents, members and officers and against any cost and attorneys fees

associated herewith. This applies to any and all claims resulting from this WTPC penning/sorting season.

3. OPTIONS / REQUIREMENT FOR RIDING HELMETS.

- a. NO PARTICIPANT UNDER THE AGE OF THIRTEEN (13) SHALL BE ALLOWED TO PRACTICE, OR PARTICIPATE IN ANY WTPC COMPETITION UNLESS WEARING A RIDING HELMET.
- b. ***Every participant/member must sign below if s/he refuses to wear a riding helmet***

I/We am/are mindful and have been advised that the Board of Directors of the WTPC strongly recommends that all participants, adults and minors, wear equestrian safety helmets during the competitions. I/We have been advised and am mindful that this recommendation by the WTPC Board of Directors is based on their concern for the personal safety of the participants and to minimize the possibility of serious injury and/or death. By checking the box below, I/we am/are hereby deciding NOT to wear a helmet even though it has been recommended for my/our own safety. By refusing to wear a helmet, I/we am/are mindful of the fact that the inherent risk if serious injury and/or death is increased by no wearing this safety feature. I/We voluntarily am/are making this decision knowing full well of the increased risks involved and am/are in no way making this decision under duress, threats or any other influence from the WTPC or its Board of Directors.

I REFUSE to wear a riding helmet

Print Name of Participant: _____

Signature of Participant: _____

As the parent of the minor child _____ (Print Name Legibly) on whose behalf I am signing the RELEASE AND WAIVER OF CLAIMS so that he/she can participate in WTPC competitions, he/she having been instructed and am mindful of the fact that the WTPC REQUIRES that all participants competing WTPC competitions under the age of thirteen (13) **MUST** wear an equestrian safety helmet. As the parent of the minor child (*listed above*) I agree that I will not let my child participate in these events without wearing such a helmet. I will provide my child with a sufficient helmet to my satisfaction that will provide the protection necessary.

Signature of Parent/Guardian: _____

I ACKNOWLEDGE I HAVE READ AND UNDERSTAND THE CONTENTS AND IMPLICATION OF THIS DOCUMENT and by affixing my signature below, I hereby state under penalty of perjury of the laws of the State of Washington, that the representations made by me in this document are true and correct; that the WTPC will rely on my representations contained herein and that I sign this WAIVER AND RELEASE OF CLAMS of my own free will and without threats, promises, or coercion. I also state that I have read the WTPC Team Penning Rules and Bylaws and agree to abide by them.

Print Name of Participant: _____

Signature of Participant or Parent/Guardian: _____ Date: _____

Please complete FRONT& BACK of form:

Membership Year: _____

Last Name: _____

Name: _____ Email: _____

Cell Phone: _____ Home Phone: _____

NOTE TO RIDERS

This form is required for all appeals, new members and inactive members that did not ride at WTPC the year prior. Appeals must be submitted to the WTPC secretary at wtpcsec@gmail.com by November 30th, and the Rating Committee will make a decision by December 31st.

The Rating Committee will be in place to review all new ratings and appeals for two events and give you your permanent rating. The Committee will also review all members at the end of the year and make any adjustments. The Committee will re-evaluate any member that is not a current member. The Committee has full authority and will be 100% supported by the Board. We want members to know that fairness is our utmost priority and WTPC will not allow underrated contestants to continually compete at the wrong rating.

*****Self-Rating*** or ***Appeal*****

Rating Choices: Write P/Penning & S/Sorting next to the number you feel you should be rated

Current Rating if this is an appeal: Penning _____ and/or Sorting _____

- | | | | |
|--------|---------|------|----------------|
| Novice | Amateur | Open | |
| • 1 | • 3 | • 5 | • Green Novice |
| • 2 | • 4 | • 6 | • Not Rated |

Experience

Penning/Sorting (check all that apply)

_____/_____ No experience at any level

_____/_____ Limited experience at local level

_____/_____ Experienced at local level

_____/_____ Starting regional level

_____/_____ Riding local & regional level

consistently

_____/_____ Experienced at local and regional

_____/_____ Successful at all levels

_____/_____ Proven winner at all levels

Team Functioning

Penning/Sorting (check all that apply)

_____/_____ Easy to find teams

_____/_____ Difficulty finding teams

_____/_____ Sought by other riders to make teams

_____/_____ Always go first on a team

- _____/_____ Always go second on a team
- _____/_____ Always a turn back rider on a team
- _____/_____ Can ride any position comfortably
- _____/_____ Rides up as a lower-rated rider

Advantages (mark all that apply)

- Horse Trainer
- Rancher
- Working Cowboy
- Cutter/Reining Cow Horse
- Riding local & regional level consistently
- Experienced at local & regional levels
- Successful at all levels
- Proven winner at all levels

Disadvantages

- Not well mounted
- Senior (>55 years old)
- Youth (<16 years old)
- Limited ability: Explain: _____
- Physical disability: Explain: _____

____ Initial Rating
____ Rating Appeal

Completed forms should be returned to:

Show Office or send to
WTPCsec@gmail.com

**Westside Team Penning Club
SELF RATING/APPEAL FORM**

Membership Year: _____
Last Name: _____

Rider's Ability (1 no ability - 10 very skilled)

1. Use leg commands, as well as reining

2. Able to handle a turn at full speed

3. Has no feeling of fright on a horse

4. Can obtain the full ability of horse

5. Rides well, has cattle working ability

6. Knowledgeable & skilled, gives lessons

7. More comfortable working slow than fast

8. More comfortable holding horn in turn

Horse's Ability (1 no ability - 10 very skilled)

1. Will hold a cow in corner with minimum
direction

2. Enters herd willingly

3. Stops and starts on touch

4. Will turn a cow going down the wall minimal
direction

5. Works quietly in the herd

6. Will stop a cow coming down the hole

7. Keeps head down and watches cows while
working

8. After choosing cow will work to keep it going

9. Works from leg commands

10. Works off haunches, quick and athletic

11. Has penning/sorting experience

Cattle Work (1 no ability - 10 very skilled)

1. Ability to read cattle

2. Have access to practice cattle

3. Able to isolate a cow

4. Able to move though herd and come out clean

5. Able to choose the right position and angle

Show Office or send to
WTPCsec@gmail.com