



2025 MEMBERSHIP FORM

CONTACT INFORMATION OF PRIMARY MEMBER

First Name: _____ Last Name: _____

Email (required): _____ Phone: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Additional Family Member Names:

(Family Memberships Only – please indicate which family members will be using annual XC passes purchased):

Member #2: _____ XC Member #3: _____ XC

Member #4: _____ XC Member #5: _____ XC

MEMBERSHIP TYPE

Adult – 18 years of age or older as of January 1st

Youth – 17 years of age or younger as of January 1st

Family – Two adults and any children living in the same household

- | | |
|---|--|
| <input type="checkbox"/> Annual Adult - \$85 | <input type="checkbox"/> Annual Family - \$140 |
| <input type="checkbox"/> Annual Adult + Annual XC Pass - \$165 | <input type="checkbox"/> Annual Family + Annual XC Pass - \$220 |
| <input type="checkbox"/> Annual Youth - \$65 | <input type="checkbox"/> Annual Family + 2 Annual XC Passes - \$300 |
| <input type="checkbox"/> Annual Youth + Annual XC Pass - \$145 | <input type="checkbox"/> Annual Family + 3 Annual XC Passes - \$380 |
| <input type="checkbox"/> Non-Rider Supporter - \$25 | <input type="checkbox"/> Annual Family + 4 Annual XC Passes - \$460 |

I, the undersigned MHC Member, herein request access and permission to occupy, use, enjoy and/or ride or handle horses on the premises of Big Sky Horse Park, ("BSHP"). I understand and agree that whether I am participating in equine activities within BSHP premises or exposing myself to the inherent hazards or injuries associated with equine handling and activities on any part of the premises, I am doing so willingly with the understanding that horses are inherently dangerous. The undersigned agrees that a member's breach of MHC's Member in Good Standing policy as defined in MHC's Policies & Procedures constitutes a breach of this agreement and may render this agreement void and revocable at the discretion of the MHC Board of Directors. Further, I understand: the purpose of MCA27-1-725 through 27-1-727 is to assist courts and juries in defining the circumstances under which persons responsible for equines may be found liable for damages to persons harmed during equine activities. It is the policy of the State of Montana that a person is not liable for damages sustained by another solely because of risks inherent in equine activities if those risks are or should be reasonably obvious, expected, or necessary to persons engaged in equine activities. It is also the policy of the State of Montana that an equine activity sponsor or equine professional who is negligent and causes foreseeable injury to a participant bears responsibility for that injury in accordance with other applicable law. Further, the undersigned acknowledges that I have had the opportunity to inspect the premises and surrounding conditions for inherent hazards associated with the nature of the premises (including icy winter conditions) each time I occupy the premises as a member, participant, spectator or invitee and therefor wish to make this acknowledgement and agreement perpetually binding from the date herein signed. Under 18 riders must wear ASTM/SEI approved riding helmets. The use of approved and properly adjusted riding helmets, safe tack and responsible horsemanship for riders at BSHP is encouraged for all. SUPERVISING A MINOR: The below signed herein certifies I am a parent or legal guardian having full authority and acknowledge that the minor above-named, understands and accepts that they are assuming inherent risks associated with all activities that they are involved in at BSHP.

Signature of Primary Member/Guardian: _____

Signature of Secondary Adult Family Member: _____

Make checks payable to: **Missoula Horse Council**
Mail Membership Form to: **Missoula Horse Council, P.O. Box 3841, Missoula, MT 59806**