Potomac Bridle & Hiking Trails Association		
LPBHTA , Treasu	ure The Trails	nded 60's
PBHTA Attn: Barbra Johnson	A Non-Profit 501 (C) (3) Organization	
11611 Glen Rd.		
Potomac, MD 20854		
MEMBERSHIP APPLICATION	NEWRENEWAL	
THE POTOMAC BRIDLE & HIKING TRAILS ASSOCIATION (PB&HTA) IS A NON-PROFIT ORGANIZATION DEDICATED TO PRESERVING AND DEVELOPING TRAILS IN POTOMAC, MARYLAND AND THE SURROUNDING REGION FOR HIKERS AND HORSEBACK RIDERS.		
	checks payable to PBHTA, Zelle payments can be m nta2@gmail.com, and paypal is available at pbhta.org	
ANNUAL DUES \$35 (INDIVIDUAL)	iiaz@gmaii.com, ana paypai is available al ponia.org	ς.
\$50 (FAMILY)	I WISH TO RECEIVE UPDATES	
\$100 (SILVER/BARN) \$250 (GOLD)	BYUPSPEMAIL	
\$500 (PLATINUM)		
\$ ADDITIONAL DONATION		
NAME		
(First) ADDRESS	(Last)	
(Street)		
(City) (State, 2	Zip)	
HOME PHONE	CELL	
E-MAIL		
LOCATION OF STABLE		
YOUR MEMBERSHIP IS COMPLETED WITH YOUR SIGNATURE AND		
DATE ON THE LIABILI	TY RELEASE AND WAIVER	
By joining PBHTA and participating in hiking and trail riding, I fully understand that hiking and trail riding can be dangerous. I understand that my horse or I may be injured as a result of my negligence, the negligence of others or through no fault of my own or anyone else, because of the nature of hiking or trail riding. I also understand that horses, even the most well-trained animals, can be unpredictable and difficult to control. I wish to participate in the activities of PBHTA and I accept and assume all of the risks of injury (including death) to my property or me. PBHTA is released from any claim of any kind for my injury or death or loss of my property.		
In exchange for participating in PBHTA-sponsored activities, for myself, my heirs, guardians, and legal representatives, I release and agree not to make or bring any claim of any kind against PBHTA or its officers, members, guests or landowners or other persons making property available for PBHTA for any injury arising out of my participation on the trails. I will keep all those released by this agreement free of any damages or cost because of those claims.		
By signing this Liability Release and Waiver, I understand that I am waiving or releasing any right which I might have to sue or make any claim which I might have or which might subsequently arise or occur against PB&HTA, its officers, members, families, guests or landowners over whose land I hike or ride, for any loss or damage or from any claim resulting in injury. I sign this willingly and voluntarily.		
SIGNED DATE	DATE	
SIGNEDDATE	(Guardian's signature for minor child)	
NAME		
NAME (Please Print)	(Print your name and name of minor child)	