



Inland Empire Barrel Racing Association

2017 Membership Application

(Must be filled out completely before your points will count, please print clearly so all information is legible. Newsletter will be email only, unless a hard copy is requested.)

Members must reside in Spokane, Stevens, Ferry, Pend Oreille, Lincoln, Whitman, Adams, Grant, Douglas & Okanogan Counties in the State of Washington and Bonner, Kootenai, Shoshone and Latah Counties in the State of Idaho

Name: _____
 Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Phone Number: _____ Cell Number: _____
 Email: _____ Hard Copy? YES NO

(For award purposes): Coat Size: _____ Boot size (horse): _____ Horse Blanket Size: _____

Please include each member: _____

OPEN DIVISION COMPETITOR:

Rider: _____ Horse(s): _____

2000/500 NOVICE & SENIOR REGISTRATIONS BELOW: *Application will not be accepted w/o lifetime earnings filled in*

Rider's Name	Horse Name: Registered & Barn	2000/500	Lifetime Earnings

YOUTH (AGES 13-18) AND JUNIOR (12 and under) REGISTRATIONS BELOW: Age as of 10/1/16

Rider's Name	Youth or Junior	Date of Birth

Membership Fee: (INDIVIDUAL: \$25 FAMILY: \$35) \$ _____

\$10 Awards Nomination Fee (required in order to be eligible for yearend awards in each division)
 _____ Open _____ \$2,000 Novice _____ \$500 Novice _____ Senior Division \$ _____

TOTAL FEES: (Make checks payable to IEBRA) \$ _____

IEBRA RELEASE FORM

As a member of the IEBRA, I hereby agree to hold harmless and assume the risk of any injury to myself, my property and every minor person who accompanies me to an IEBRA sponsored or co-sponsored event. Further I will hold harmless each equine activity sponsor from any claim or injury or damage that could be sustained by myself, my property and every minor person who accompanies me to an IEBRA sponsored or co-approved event.

Membership Signature: _____ Date: _____

(Member agrees to abide by ALL IEBRA rules)

Parent/Guardian Signature: _____ Date: _____

(Required for Youth/Junior Membership)

Mail Membership Application to: Lola Rickey, 8993 Scotia Rd., Newport, WA 99156

Payment Received by: _____ Check #: _____ Date: _____