



**CALGARY HORSESHOE CLUB  
MEMBERSHIP APPLICATION FORM**

Membership Year: 2024

The Membership year runs from January 1<sup>st</sup> to December 31<sup>st</sup>. This form must be completed and returned to the Membership Chairperson PRIOR to the start of the new season, (January 1<sup>st</sup>) to satisfy Alberta Gaming and Alberta Sport Connection. Membership fees to be paid to Mary Holley or Darla Lallier. (Make cheques payable to the Calgary Horseshoe Club).

Please Print Clearly.

Name: \_\_\_\_\_ AHPA Card # 62 \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

You hereby agree to receive emails from CHC & AHPA.

PLEASE CIRCLE ONE                      40' MEN                      30' MEN                      WOMEN  
DIVISION ONLY:

**Junior and PeeWee: Free**

**FEES:** (Age is as of January 1, 2024)

Age 18 – 65 - \$60

Age 65 – 80 - \$50

Over 80 - \$20 if you were an active member for at least 5 years.

DATE OF BIRTH:                      Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

FEES ENCLOSED \$ \_\_\_\_\_

*Membership in the Calgary Horseshoe Club includes affiliation with AHPA and Horseshoe Canada.*

**WAIVER:** In consideration of participating in horseshoe activities, I hereby waive, release and forever discharge The Calgary Horseshoe Club, all Officers, Employees, Agents and Servants of the afore mentioned organization, and all fellow participants of this event, for any and all actions, causes of actions, damages, loss or injury I may suffer as a consequence of participating in any organized event (league or tournament) at the Calgary Horseshoe Club or any affiliated organization in Alberta, Canada or the USA.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_