



2012 Membership Application



CMSA Club Code: MN1

<input type="checkbox"/>	Combined MMSA & CMSA Individual Membership includes: Competition Card, Decal, Riders Rulebook, one 1-year subscription to the "CMSA Rundown" Magazine and Points Tracking Services.	\$ 85.00
<input type="checkbox"/>	Combined MMSA & CMSA Family Membership includes: CMSA Cardholders living in one household will receive a Decal & Competition Card, Points Tracking Services, one Riders Rulebook & one 1-year subscription to the "CMSA Rundown" Magazine per household.	\$ 125.00
<input type="checkbox"/>	Combined MMSA & CMSA Associate Membership includes: Non-competing & Single Season Competing Associate cardholder will receive an Associate Card, a 1-year subscription to the "CMSA Rundown" Magazine and Decal. Competing Associate Membership is limited to one season and Associate Members receive no points tracking, prizes or payback. <i>Calendar year membership, not a 365 day membership.</i>	\$ 60.00
<input type="checkbox"/>	Optional: CMSA Pro Status is available to all Classes and Levels of competition. To be eligible to enter any sanctioned CMSA Pro or stand alone CMSA Pro event the CMSA member shall possess a CMSA Membership Card with Pro status noted. Cost is \$50.00 per competition year per member.	\$
<input type="checkbox"/>	MMSA Individual Membership Includes: Eligibility for year-end awards and move up buckles. Must be a current CMSA member in order to participate in any CMSA sanctioned events.	\$ 25.00
<input type="checkbox"/>	MMSA Family Membership Includes: Eligibility for year-end awards and move up buckles. All family members must be current CMSA members in order to participate in any CMSA sanctioned events.	\$ 35.00
Total Due with Application - all checks payable to Minnesota Mounted Shooters Association (MMSA)		\$

MMSA/CMSA memberships are now 365 day memberships based on the date your membership is processed unless noted above.

ALL INFORMATION REQUIRED: New / Renewal CMSA # _____ Level _____ Pro Status
 Name _____ Date of Birth _____ Male / Female
 Address _____ City _____ State _____ Zip _____
 Daytime Phone (_____) _____ Cell Phone (_____) _____
 E-Mail Address _____

FAMILY MEMBERS	<input type="checkbox"/> New / <input type="checkbox"/> Renewal CMSA # _____ Level _____ Date of Birth _____ <input type="checkbox"/> Male / <input type="checkbox"/> Female Name _____ E-Mail Address _____ <input type="checkbox"/> Pro Status
	<input type="checkbox"/> New / <input type="checkbox"/> Renewal CMSA # _____ Level _____ Date of Birth _____ <input type="checkbox"/> Male / <input type="checkbox"/> Female Name _____ E-Mail Address _____ <input type="checkbox"/> Pro Status
	<input type="checkbox"/> New / <input type="checkbox"/> Renewal CMSA # _____ Level _____ Date of Birth _____ <input type="checkbox"/> Male / <input type="checkbox"/> Female Name _____ E-Mail Address _____ <input type="checkbox"/> Pro Status
	<input type="checkbox"/> New / <input type="checkbox"/> Renewal CMSA # _____ Level _____ Date of Birth _____ <input type="checkbox"/> Male / <input type="checkbox"/> Female Name _____ E-Mail Address _____ <input type="checkbox"/> Pro Status

(Please use another sheet for additional family members)

I understand that I am participating in a sport, which contains dangers, and risks may arise, including, but not limited to, accidental injury, the forces of nature and illness. In consideration of the right to participate in these events and the services provided for me by the Cowboy Mounted Shooting Association (CMSA), Minnesota Mounted Shooters Association (MMSA), and their agents, I have and do hereby assume the risks associated with such events. The contestant shall at his own expense, defend management and/or all sponsors, their cardholders, or employees from any and all such claims and indemnify, from any and all liability, damage and costs arising from injuries to person or property occasioned by any act or omission of the contestant. By joining CMSA and/or MMSA, I am agreeing that images of my horse, equipment and myself may be photographed, videoed or recorded in any way and re-used without my permission and without compensation. I further agree to support and enforce CMSA Rules as stated in the CMSA Rule Book and all MMSA Club Policies. This Solidarity Agreement binds all CMSA Members to enforce CMSA Rules and assure our competition cardholders they will play the same game coast-to-coast when they travel for CMSA competitions. If the undersigned has elected a joint membership in the MMSA and the CMSA, the above statements apply to and include both associations. By signing below I also state that I am not prohibited by law to use or handle firearms and I have never been convicted of a felony nor have criminal charges pending.

Signature of Applicant Required if over 18 years of age / Date

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Mail completed form and check (payable to MMSA) to:

Tom Bamford, 4399 313th Ave NW, Cambridge, MN 55008 Phone: (612) 810-8031

Visit our website: www.mncmsa.com or email us at cmsamn@hotmail.com

MMSA Office Use Only: Amount Tendered: \$ _____ Cash _____ or Check # _____ Date: _____ Received by: _____