



# Minnesota Back Country Horseman Membership Form

**Membership Info**

\_\_\_\_\_

(Print Name)

\_\_\_\_\_

(Address)

\_\_\_\_\_

(City)

\_\_\_\_\_

(State) \_\_\_\_\_ (Zip)

\_\_\_\_\_

(Phone)

\_\_\_\_\_

(Additional Phone)

\_\_\_\_\_

(Email)

\_\_\_\_\_

(Additional Email)

\_\_\_\_\_

(Family Member Print Name)

\_\_\_\_\_

(Additional Family members)

**I wish to become a member of:**

\_\_\_ NW Metro Chapter

\_\_\_ SE MN Chapter

\_\_\_ Zumbro Bottoms Chapter

\_\_\_ MN State member at large  
(not in any chapter)

\*\*\*\*\*

\$ 30 \_\_\_ Family Member **(One chapter only)**  
(2 or more family members in same household)

\$ 25 \_\_\_ Individual Member **(One chapter only)**

\$ 50 \_\_\_ Associate Member (business or organization  
(no vote awarded))

\*\*\*\*\*

Additional dues to join another chapter

\_\_\_ NW Metro \_\_\_ SE MN \_\_\_ Zumbro

\$ 10 \_\_\_ Chapter dues as a family member

\$ 8 \_\_\_ Chapter dues as an individual member

\$ 2 \_\_\_ State dues if member in another state

\$ \_\_\_ Total dues owed.

\$ \_\_\_ Additional Donation to: \_\_\_\_\_

\$ \_\_\_ Total Enclosed

Make check payable to BCH-MN  
and mail to State treasurer:

Backcountry Horseman- MN  
% Bruce Kvittem  
48729 County 1 Blvd.  
Kenyon, MN 55946-4105

(Chapter dues will be submitted to  
each appropriate chapter)

**By signing this membership application, you will agree to the terms of our Liability Release. You also agree to receive notices from BCH-MN or BCHA by electronic transmission at the above email address.**

Back Country Horsemen of Minnesota is a public charity as defined in Internal Revenue Code Section 501(c) (3). Accordingly, membership dues paid to BCH-MN may be treated as deductions characterized as "charitable contributions" when computing federal and state income tax obligations.

Signatures: (all adults must sign)

\_\_\_\_\_ **Date** \_\_\_\_\_

**Signature:**

\_\_\_\_\_ **Date** \_\_\_\_\_

**Signature:**

Liability Release: Recognizing the fact that there is a potential for an accident where ever horse use is involved, which can cause injuries or death to horses, riders and spectators, and also recognizing that Back Country Horsemen of Minnesota including its chapters, officers, directors and /or members cannot know the condition of trails or the experience of riders or horses taking part in trail rides or other Back Country Horsemen of Minnesota functions, I do hereby release Back Country Horsemen of Minnesota, (and affiliated chapters) its officers, directors and members from any claim or right for damages which might occur to me, my minor children or horses.

Pursuant to MN State Stat. § 604A.12