



Membership Application

Type of Membership (Select One):

Individual (\$120/year): _____ *Family (\$150/year): _____

*(*Family memberships include children under 21 living in the same household.)*

Name of Applicant: _____

Address: _____

Email: _____ Phone: _____

Complete Following for Family Membership:

Spouse of Applicant: _____

Child No. 1: _____ Age: _____

Child No. 2: _____ Age: _____

Child No. 3: _____ Age: _____

Child No. 4: _____ Age: _____

Memberships follow the calendar year of January through December.

Rates may be prorated 50-percent beginning in July of the calendar year.

Membership includes use of the facility (when not leased) during daylight hours and until 10 p.m. with lights. Monday and Wednesday evenings are for timed event practice and Tuesday and Thursday evenings are for roping event practice.

By entering into this agreement the member (and all family members) agree to abide by the rules set forth by the Arena Board and the City of Bay Minette.

I agree that by signing this membership application that I and all those attending will abide by all rules and regulations as set forth by the City of Bay Minette governing the usage of city-owned property. I (applicant) agree not to hold the City of Bay Minette, its employees or agents liable for any claims for personal injury, deaths, property damage or any other claims resulting from use of the city-owned property.

Applicant Signature: _____ **Amount Paid:** _____

City Representative: _____ **Date:** _____

(Return completed forms and payment to City of Bay Minette, 301 D'Olive Street, Bay Minette, AL 36507)