

ALEXANDRIA EQUESTRIAN ASSOCIATION

2016 MEMBERSHIP

The Association's goal is to further the mutual enjoyment that we as neighbors derive from our horses, our surroundings and our camaraderie. In our collective interest is the retention and promotion of our area's rural character.

Membership is open to all residents within Alexandria Township, and a limited number of non-township residents. As a non-resident, you may be placed on a waiting list.

MEMBERSHIP FEES (INCLUDES \$50 WORKBOND):
Workbonds are refundable after 5 hours of service

- Township resident: Individual \$90 or Family \$100
- Non-resident: Individual \$130 or Family \$150
- Non-riding landowner \$50

INSURANCE REQUIREMENT:

Our best way to assure landowners that they can feel comfortable with our members riding on their land is to make personal liability insurance a requirement of AEA membership. This is easier and less expensive than it sounds!

Each member is required to carry a personal liability policy in the minimum amount of \$1,000,000. Proof of coverage is required in order to receive an AEA membership tag.

Option 1) Homeowners Insurance (please verify with your insurance company that there is no equine exclusion clause). Provide copy with your completed membership form.

Option 2) Join United States Equestrian Federation (non-competitive membership is \$35. Join online at www.usef.org. *Each rider must provide individual membership card if relying on USEF membership for proof of insurance*

ALEXANDRIA TOWNSHIP LANDOWNERS

- Check here to grant permission to fellow AEA members to access trails on your property, even if they are land-locked today so that we can monitor for potential future trails.

REQUIRED INFORMATION:

Name: _____

Home Address: _____

Telephone: _____

E-mail address: _____

Township of Residence: _____

If you board in Alexandria Township, please state where

Equine interests: _____

Family members (please list additional riders/relationship)

1. _____ / _____

2. _____ / _____

3. _____ / _____

I hereby acknowledge that I have read the Alexandria Equestrian Association ("AEA") Rules of Conduct (available at www.aeanj.com) and agree, on behalf of myself and any family members listed above, to abide by these rules. I understand that any breach of these rules may be grounds for membership termination. I hereby release from any and all liability the AEA, its officers, and members, and the landowners of any properties through which the AEA trail system passes.

"WARNING: UNDER NEW JERSEY LAW, AN EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES, PURSUANT TO P.L., CHAPTER 287"

Signature: _____ date: _____

(Must be 18 or over)

Please make check payable to the Alexandria Equestrian Association. Send check, proof of insurance and completed and signed membership form to:

**AEA Membership
P.O. Box 75, Pittstown, New Jersey 08867.**

Call Lauren Brown (610-216-0713) if you have any questions.