



2019 Season Membership Application  
**MANITOBA BARREL RACING ASSOCIATION**  
 Box 50042 Brandon South East, Brandon, MB R7A 7E4  
 Tel: 204-867-0233  
 e-mail: mbrasecretary@hotmail.com

**MEMBERSHIP WILL NOT BE PROCESSED WITHOUT PAYMENT.**

**YOU CANNOT COMPETE UNTIL YOU HAVE YOUR MEMBERSHIP CARD OR RECEIPT AS PROOF OF PURCHASE.**

**Membership Information: \*\*Please print clearly!\*\***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City/Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Telephone: (\_\_\_\_) \_\_\_\_\_ Member Signature: \_\_\_\_\_  
 (Parent/Guardian of Youth or Pee Wee)  
 Email Address: \_\_\_\_\_ (include your e-mail if you want to receive updates through the year)

**Membership Cost: \$60.00: Put a checkmark in the division(s) you are going to be entering:**

- Open  Youth(16 & under as of calendar year)  Select (over 50 years as of calendar year)  
 PEE WEE (4-10years as of January 1, 2019) – \$20.00 NO cross entry to any other division allowed

**YOUTH AND PEEWEE MEMBERSHIPS YOU MUST SUBMIT A COPY OF YOUR BIRTH CERTIFICATE EVERY YEAR.**

\$ \_\_\_\_\_ Amount Enclosed  New Membership  Membership Renewal

Payment options available: E-Transfer and Cheque. If you use E-transfer (mbrasecretary@hotmail.com) we still require the membership form. Make cheque or money order payable to MBRA.

Should you wish to add another horse over the course of the season, please contact the MBRA Office.

*Include the horse's Registered Name and Barn Name if you are going to be using both names at jackpots; so we have it for attendance.*

Horses' Names	
Name	Registered Name (If applicable)

**Waiver: \*\*Must be signed in order to complete the membership!\*\***

I (we) hereby make application for membership in the MBRA. I (we) hereby release the MBRA board, the organizers of MBRA events, executive, directors and personnel associated with the MBRA from any claim or loss to myself, employees, associates, horse(s), and or equipment.

Members Signature \_\_\_\_\_

Parent/Guardian Signature (if under 18 years of age) \_\_\_\_\_

**E-TRANSFERS FOR PAYMENT CAN BE SENT TO [mbrasecretary@hotmail.com](mailto:mbrasecretary@hotmail.com) send completed form and password in a separate e-mail.**

<b>OFFICE USE ONLY:</b>	Date Received:	Payment E-Transfer or Cheque:
Date Receipt & Membership Card Sent:	Birth Certificate Received:	

**ALLOW 7 DAYS FOR MEMBERSHIP TO BE PROCESSED!**