



**SUPERSTITION  
HORSEMEN'S  
ASSOCIATION, INC.**

SHA Use Only  
Date:  Cash  Check \_\_\_\_\_  PayPal  
 New  Family  Full Year

**\*\*\* MEMBERSHIP FORM \*\*\***  
**OCTOBER 2024 – SEPTEMBER 2025**

I hereby make application/renewal to the Superstition Horsemen's Association, Inc., and in so doing agree to abide by SHA's Mission Statement.

**Mission Statement**

The Superstition Horsemen's Association, Inc. is a group of concerned citizens formed to ensure the rights and privileges of horsemen; to promote humane treatment of horses; and to actively pursue favorable legislation concerning the above.

I further agree to abide by the bylaws of the Association (copies are available upon request). I strongly desire to maintain the western lifestyle in this community.

**INDEMNITY AGREEMENT**

For and in consideration of my/our Membership and participation in all events sponsored by the Superstition Horsemen's Association, Inc., (SHA) of Apache Junction, Arizona, the undersigned hereby releases and forever discharges the SHA for any claim or demand for personal injuries or property damage occurring while participating in any event sponsored by SHA, and the undersigned hereby further agrees to indemnify the SHA (including all officers and members, and all property owners upon whose property the various events take place), and save them harmless from any claims, demands or judgements which may be asserted or rendered against them by any person whatsoever for death, personal injury or property damage occurring during any event sponsored by the SHA, including the reasonable value of the services of attorneys retained by the SHA in defense of any claim of action arising there from.

**Date of Application:** \_\_\_\_\_ **New Applicant:** \_\_\_\_\_ **Renewal:** \_\_\_\_\_

**Name(s):** (1) \_\_\_\_\_ (2) \_\_\_\_\_  
Print Name Print Name

**Signature(s):** (1) \_\_\_\_\_ (2) \_\_\_\_\_

<b>Winter Address</b>	_____
Dates: _____	Street (Please include apartment and/or space number.)
	_____
	City State Zip Phone
<b>Summer Address</b>	_____
Dates: _____	Street (Please include apartment and/or space number.)
	_____
	City State Zip Phone

**Email Address** \_\_\_\_\_  I would prefer to receive my newsletter via email

**Areas of Interest:** *I am interested in the following committees:*

Trail  Activities  Parade  Road Cleanup  Political  How can I help? Call me.

**MEMBERSHIP FEES: \$20 Single Membership, \$30 Family and Associations**

All fees must be paid in U.S. Currency. You can pay online or by mail.

- Online at [www.sha4u.org](http://www.sha4u.org) via PayPal
- Mail to SHA at PO Box 2120, Apache Junction, AZ 85117