



Arena Membership

Name: _____

Parent/Guardian if under 18: _____

Address: _____ City _____ State _____ ZIP _____

Phone: _____ Email: _____ DOB: _____

Date _____

Indoor Arena Day Pass: \$20 _____ Outdoor Arena Day Pass: \$5 _____

Membership Options:

Individual Membership: \$200 per year _____

Family Membership (up to 4): \$500 per year* _____

*Each additional member: \$100 per year

Outdoor ONLY: \$50 per year _____

Trainer membership: \$400 per year* _____

*Trainer may bring multiple horses. Group lessons or clinics require rental of the facility. If conducting lessons at the park the student must have a membership as well (day or year). Students of trainers with a DSRP Trainer Membership receive a 10% discount on their membership. A trainer is defined as anyone who has received monies for working with horses in the past two years-training, giving lessons, etc.

Membership Rules:

The Event Center Arena is available for use from Dawn to Dusk with your membership. The arena will also be available Wednesday evenings from 6-9 PM with lights if the facility is not rented. Members are entitled to use the Event Center Arena *when it is not booked* for an Event. Membership does not include use of the lights (except for Wednesdays) or other facilities within the Event Center. The outdoor Riding Arena, Round Pen and trails are also included in your membership. While we strive to have our dirt in excellent condition at all times, it may not be freshly groomed during weekdays.

As a member it is your responsibility to check on availability of the arena. We ask that you respect other members who may be riding with you. All riders must have signed a liability release and have proof of current negative coggins for each horse at the center. No unattended or loose horses. Stall rental is not included in your membership. All injuries and incidents must be reported immediately. Please close and lock all gates behind you. Any violation of these or Dripping Springs City Park Rules may result in revocation of your membership with no refund.

Signature _____

Date _____

Please mail membership form to City of Dripping Springs, P.O. Box 384, Dripping Springs, Texas 78620

or return to City Hall at 511 Mercer Street.