

**POLO AZTECA
MEMBERSHIP APPLICATION**

About You:

Name: _____

Address: _____

City, State, Zip: _____

E-mail: _____

Phone: _____

Guardian or Parent if minor: _____

Gender: M / F **Date Of Birth:** _____

List Any medical conditions:

In case of emergency:

Contact Name: _____

Address: _____

Phone: _____

Relationship to you: _____

Polo Horse Experience:

Number of Horses Owned: _____

Number of Years Polo Experience: _____

Number of Years Riding Experience: _____

USPA Member # (*) _____ **(USPA Membership is Required)**

USPA Handicap: Outdoor: _____ **Arena:** _____

Are you a member of any other polo club: Y / N If Yes, Please list

Are you a member of any hunt or pony club: Y / N If Yes, Please list

Type of membership desired

By Season (Fall Season Oct 1 - Jan 15, Spring Season Jan 16 - Apr 30) - \$250 per season. Includes chukkers and use of polo facilities (arena/hitting cage)

By Chukker (\$10 per chukker)

Interscholastic Player (Contact the club for more information)

Affiliated Club Member Name of Club: _____

How did you hear about Polo Azteca?

Our website

USPA website

Referral from another member

Local Newspaper

Other: _____

Please return via email to: carliegeorge@yahoo.com or mail to 34022 N 13th Pl Phoenix AZ 85085

Polo Azteca reserves the right to refuse membership to any applicant for any reason