

9011 Lake Worth Rd. • Lake Worth, FL 33467 • Telephone: (800) 232-8772 • Fax: (888) 391-7410

Website: www.uspolo.org • Email: clubs@uspolo.org



The United States Polo Association[®] (USPA[®]) membership year is from January 1 through December 31 of each year.

CLUB TYPE

Active Member Club\$200)
Shall be represented by a voting Delegate to the Association, shall be located	ł
within the United States and shall, upon election to annual membership in	ı
the Association, share all privileges and obligations of the Association. These	ç
privileges include voting, hosting Association events, recommending hand	-
icaps, and registering players. An Active Member Club shall, at all times, be	Ş
obligated to apply and enforce the Constitution, By-Laws, Rules and direc	-
tives of the Association. Failure of an Active Member Club to discharge its	s
obligations may be grounds for suspension or termination of the privilege o	f
Club membership, or other penalty, by the Board of Governors, or the Chair	-
man of the Association. During the term of any suspension of its member	-
ship, a Club shall have the rights and obligations of an Inactive Member Club	
*Clubs will remain in Provisional (non-voting) Status until approved to become	:
fully active by the USPA Board of Governors.	

Affiliate Member Club.....\$200 Shall be represented by a non-voting Delegate to the Association, shall be a foreign Club or Association which competes with Active Member Clubs and shall, upon election to annual membership in the Association share all privileges and obligations of the Association except those specifically prohibited. The privileges shared include hosting Association events, recommending handicaps, and registering players. An Affiliate Member Club shall, at all times, be obligated to apply and enforce the Constitution, By-Laws, Rules and directives of the Association. Failure of an Affiliate Member Club to discharge its obligations may be grounds for suspension or termination of the privilege of Club membership, or other penalty, by the Board of Governors, or the Chairman of the Association. During the term of any suspension of its membership, a Club shall have the rights and obligations of an Inactive Member Club.

Associate Member Club.....\$150 Overseas clubs that wish to receive USPA communications and publications. Associate Member Clubs may select a non-voting Representative to the USPA but may not register players, recommend handicaps, host Association events or enjoy other privileges than those herein specifically granted.

CLUB INFOR	MATION	
Club Name:		

Mailing Address:

City, State, Zip: _____

Country:

Facility Address (If different than mailing address):

Street:

City, State, Zip: _____

Country: _____

What Facilities does your club have? Outdoor Arena

Phone:

E-mail:

INSURANCE INFORMATION

Provider Name:

Minimum Coverage: _____

Policy Number: _____

Effective Date (MM/YY to MM/YY)

LEADERSHIP INFORMATION

*Delegate's Name: ____

An Affiliate Member is not eligible to be the delegate of an Active Member Club.

*President:

*Vice President: _____

*Secretary:

*Treasurer:

Manager: ____

Equine Welfare Representative:

* All officers must be current USPA[®] Members

ADDITIONAL INFORMATION

Do you own or lease your facility? Lease

Which of the following is your club considered? ☐ Sole Proprietorship ☐ Member owned ☐ Corporation

Which seasons does you club operate? □ Spring □ Summer □ Fall □ Winter

Does your club have a Polo School? 🔲 Yes 🗌 No Instructor Name: _____ E-mail, Phone:

What outdoor goal level does your club play? $\square 0 - 4 \square 4 - 8 \square 8 - 12$ 12 - 16 **□**16 – 20 $\Pi 20 +$

Does your club host any of the following? □USPA[®] Tournaments ☐ USPA[®] Clinics ☐ Umpire Clinics Intercollegiate/Interscholastic U Women's Polo National Youth Tournament Series

Does your club have horses available? \Box Yes, for lessons \Box Yes, for leasing \Box No

Does your club have on-site stabling for members? Yes

Website:

Facebook: _____

Instagram: _____

Twitter: _____

Colors:

REQUIRED SUPPORTING DOCUMENTS (Please attach)

Copy of lease or proof of ownership, if you lease more than one facility, a copy of each lease will be required

Certificate of Insurance (\$1 million liability) with USPA® listed as certificate holder

- □ Photographs of facility, fields, arena, barns, etc.
- □ Club By-Laws, signed by Officers
- □Stated Intent/Purpose of Club

CLUB MEMBERS (Attach a separate list if necessary)

Registered Player N	Aembers (3+ Registered	Players Required.	6+ required to come off	provisional status)

1)				 	
2)			 	 	
3)			 	 	
Other Members					
4)		Player	Student	Social	Non-Playing
5)		Player	Student	Social	Non-Playing
6)		Player	Student	Social	Non-Playing
	1				

USPA TERMS AND CONDITIONS

1) All USPA® Member Clubs must abide by the Constitution, By-Laws, Tournament Conditions, Rules and Policies of the USPA®, as published yearly in the USPA® Rulebook, and as amended from time to time.

2) The Association is a voluntary, private sporting organization. Membership in the Association is at-will and subject to the discretion of the Association at all times. Subject to the provisions of By-law 11, 15 and 16, a Member Club's previously accepted membership or Member Club status may be suspended, revoked or terminated at any time by the Association where a Member Club acts in a manner that is deemed, in the sole and absolute discretion of the Association, to be inconsistent with, contrary to, or violate the Association's Rules, By-Laws, Terms and Conditions of the Membership Application, Code of Conduct set forth in By-Law 4(b), or tournament conditions.

3) The names of USPA® National and Circuit events are Registered Trademarks of the United States Polo Association®. By membership in the USPA®, your club agrees not to use these names without having been awarded these events by your USPA® Circuit Governor and/or the USPA® Tournament Committee and approved by the USPA® Board of Governors.

4) USPA® clubs wishing to host National, Circuit or Sanctioned USPA® events, must produce a current certificate of insurance including participant's liability of a minimum coverage of \$1,000,000.00 at the time they apply for the event. (USPA® Tournament Conditions Section IV paragraph E.)

5) All USPA® Member Clubs assume any risk with respect to my participation in any USPA® sanctioned activity, tournament or game (collectively, "USPA® Event") and to indemnify and hold harmless the sponsoring club and any other sponsor or member clubs of the USPA®; any charity or other beneficiary which may benefit from the USPA® Event; the USPA®; the owners, lessees or lessors of any premises where a USPA® Event may be held; and all directors, governors, officers, trustees, agents, employees, or servants of any of the above-named entities (collectively the "Indemnified Parties"), from any claim for any personal injury or property damage sustained by any person or entity, including, without limitation, all third parties, all other members, entrants, and any person performing services for any of the Indemnified Parties, arising out of its conduct.

6) All USPA® Member Clubs agree to be responsible for any injury or damage caused by themselves, their agents, employees and /or their mounts.7) With prior notice, your Club agrees to allow access to your Club grounds to any USPA® representative for the purpose of facility inspection, animal welfare inspec-

tion or drug testing, or review of PDI expenditures.

REQUIRED SIGNATURES (Two Individuals Necessary)

By signing this registration form and accepting the privileges of the USPA*, I acknowledge that I have read, understand, accept and agree to the terms and conditions as set forth.

Delegate's Signature: _

Officer/ Manager Name: _

Signature: ____

SUBMIT COMPLETE APPLICATION TO: CLUBS@USPOLO.ORG

PAYMENT SECTION

Total	Type of Payment: (US Funds ONLY)	
\$	Check (made out to USPA*) #	□Credit Card

Registration fees to the USPA® are not deductible as a charitable contribution.

To pay via credit card please submit this form and call the USPA° Office

Date:

Date:

FOR USPA USE ONLY

□ Copy of lease or proof of ownership, if they lease more than one facility, a copy of each lease will be required

□ Club has 3+ Registered Player Members

□ Delegate is a Registered Player Member

List of Officers; with individual confirmations that they are assuming the role as an officer (All current members of the USPA*).

□ Certificate of Insurance (\$1 million liability) with USPA® listed as a certificate holder

□ Photographs of facility, fields, arena, barns, etc.

□ Club By-Laws, signed by Officers

□ Stated Intent/Purpose of Club

□ Completed New USPA Club Application

USPA Services Employee Name:

Club and Member Support Committee Approval Date ____

*Attach all electronic approvals to application

Circuit Governor Approval Date _____ Executive Committee Approval Date ____