



2021 UNITED STATES POLO ASSOCIATION® MEMBER CLUB APPLICATION

9011 Lake Worth Rd. • Lake Worth, FL 33467 • Phone: (800) 232-8772 • Fax: (888) 391-7410 • www.uspolo.org • uspa@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
(Club in the U.S., can host USPA events and recommend handicaps)
*Clubs will remain in Provisional (non-voting) Status until approved by the USPA Board of Governors
- Affiliate Member Club.....\$200
(Club outside of the U.S., non-voting, can host USPA events and recommend handicaps)
- Associate Member Club.....\$150
(Non-voting, foreign club, cannot host USPA events or recommend handicaps)

*For a full description of member club types please go to www.uspolo.org

CLUB INFORMATION

Club Name: _____

Mailing Address: _____

City, State, Zip: _____

Country: _____

Facility Address (If different than mailing address):

Street: _____

City, State, Zip: _____

Country: _____

Phone: _____

E-mail: _____

Website: _____

Facebook: _____

Instagram: _____

Twitter: _____

Club Colors: _____

Does your club have a polo school? Yes No

Instructor Name: _____

CLUB MEMBERS (Attach a separate list if necessary)

Active Member Clubs

Six (6) or more Registered Player Members 18 years of age or older.

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____

*Members must be either paid current members of USPA or submit a Membership Application

Affiliate Member Clubs

Six (6) or more Registered or Affiliate Player Members.

LEADERSHIP INFORMATION

Delegate's Name: _____

Must be a Registered Player Member to be the Delegate of an Active Member Club

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

Manager: _____

Equine Welfare Representative: _____

FACILITY INFORMATION

What Facilities does your club have? Field(s) Outdoor Arena(s)
 Covered/Indoor Arena(s)

Do you own or lease your facility? Own Lease

What name is on the deed/lease? _____

Does your club have on-site stabling? Yes No

ADDITIONAL INFORMATION

Which of the following is your club considered?

Sole Proprietorship Member owned Corporation

Limited Liability Company Other: _____

What are the club's typical playing season(s) dates?

How many individuals play at your club annually? _____

Are they all USPA Members? Yes No

How many chukkers do you plan to play at your club annually?

0 - 50 50 - 100 101 - 150 151+

What outdoor goal level will your club play?

0 - 4 4 - 8 8 - 12 12 - 16 16 - 20 20+

What arena goal level will your club play?

0 - 4 4 - 8 8 - 12 12 - 16 16 - 20 20+

In the next 6 months will your club host any of the following?

USPA Outdoor Tournament * USPA Clinics

USPA Arena Tournament * Club Leagues *

USPA Women's Tournament * Club Tournaments *

National Youth Tournament Series* Club Clinics

Intercollegiate/Interscholastic Club Practices

USPA Umpire Clinics *Count towards activity requirement

Does your club have horses available?

Yes, for lessons Yes, for leasing No

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

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

Certificate of Insurance (\$1,000,000 General Liability with participant legal liability) naming USPA®, its subsidiary & affiliated companies, directors, governors, officers, trustees, agents, employees, servants and volunteers as additional insureds

USPA TERMS AND CONDITIONS

RULES AND REGULATIONS:

- 1) The Member Club applicant acknowledges, understands, and agrees to be bound and to abide by the Constitution, By-laws, Rules, Tournament Conditions and Policies of the USPA, as published yearly in the USPA Rulebook, and as amended from time to time.
- 2) The Member Club applicant agrees to be bound and to abide by the USPA COVID-19 Protocols for USPA Member Clubs.
- 3) The Association is a voluntary, private sporting organization. Membership in the Association is subject to the requirements of membership set forth in the Association's governing documents, as in effect from time to time. Subject to the provisions of the By-laws, a Member Club's previously accepted membership or Member Club status may be suspended, revoked, or terminated at any time by the Association where such Member Club acts in any manner that is deemed, in the sole and absolute discretion of the Board of Governors, to be inconsistent with the Association's Articles of Incorporation, By-laws, Constitution, Rules of the Association, including tournament conditions, or any policies or resolutions of the Association, including any of these Terms or Conditions.
- 4) The names of USPA® National and Circuit events are trademarks of the United States Polo Association®. USPA® trademarks may only be used with the permission of the USPA®. The Member Club applicant acknowledges, understands, and agrees that it shall not use the USPA® National and Circuit event names unless the Member Club has been awarded these events per the USPA® Tournament Conditions.

_____ INITIAL HERE TO INDICATE THAT, AS A DULY AUTHORIZED REPRESENTATIVE OF THE APPLICANT MEMBER CLUB, YOU HAVE READ, UNDERSTOOD, AND AGREE ON BEHALF OF THE MEMBER CLUB APPLICANT TO THE TERMS AND CONDITIONS SET FORTH ABOVE.

INSURANCE REQUIREMENTS:

- 5) The Member Club applicant acknowledges, understands, and agrees that, as a USPA® Member Club, it must provide and maintain General Liability coverage (including liability coverage for club operations and participants in athletic or equine sports activities) with minimum limits of \$1,000,000.00 each occurrence and in the aggregate, and with United States Polo Association®, its subsidiary & affiliated companies, directors, governors, officers, trustees, agents, employees, servants and volunteers included as additional insureds. Each USPA® Member Club shall provide to the USPA a certificate of insurance confirming compliance with these insurance requirements.

_____ INITIAL HERE TO INDICATE THAT, AS A DULY AUTHORIZED REPRESENTATIVE OF THE APPLICANT MEMBER CLUB, YOU HAVE READ, UNDERSTOOD, AND AGREE ON BEHALF OF THE MEMBER CLUB APPLICANT TO THE INSURANCE REQUIREMENTS SET FORTH ABOVE.

RELEASE OF LIABILITY, HOLD HARMLESS, AND INDEMNITY AGREEMENT AND ASSUMPTION OF RESPONSIBILITY:

- 6) The Member Club applicant acknowledges, understands, and agrees to defend (at USPA's request), indemnify and hold harmless USPA, USPA Affiliated Companies and subsidiaries, USPA's successors, licensees and assigns, USPA Individual Members and other USPA Member Clubs, and the Board of Governors, officers, directors, shareholders, employees and agents of each of the foregoing, from and against any and all liabilities, claims, demands, judgments, recoveries, damages, costs and expenses (including reasonable attorneys' fees and disbursements) of any nature arising out of or relating to: (a) any breach of any representation or warranty of Member Club contained in this Agreement, (b) any breach or violation of any covenant or other obligation or duty of Member Club under this Agreement or under applicable law, (c) any liability involving horses, equine activities or the sport of polo and any tournaments or events sponsored by USPA or Member Club including, but not limited to, claims for bodily injury, death or damage to personal property arising out of Member Club's negligence and/or intentional torts, and (d) any fees or bills due to vendors as a result of a USPA-sanctioned tournament or event. In addition to the above, Member Club applicant understands, acknowledges, and agrees that its indemnification and hold harmless obligation shall apply to any claims alleging defamation, invasion of privacy, copyright infringement, commercial appropriation, media errors & omissions, failure to give credit and other intellectual property torts, or injury or damage to third parties arising in tort or contract. The validity, interpretation, construction and enforcement of this agreement shall not be restricted or limited to the governing law of the Member Club country and shall also apply with regards to any and all claims brought forth in the United States of America.
- 7) The Member Club applicant agrees to be responsible for any injury or damage caused by themselves, their members, agents, employees and/or their mounts, and expressly disclaims any responsibility or liability of USPA for any such injury or damage.

_____ INITIAL HERE TO INDICATE THAT, AS A DULY AUTHORIZED REPRESENTATIVE OF THE APPLICANT MEMBER CLUB, YOU HAVE READ, UNDERSTOOD, AND AGREE ON BEHALF OF THE MEMBER CLUB APPLICANT TO THE RELEASE OF LIABILITY, HOLD HARMLESS, AND INDEMNITY AGREEMENT AND ASSUMPTION OF RESPONSIBILITY SET FORTH ABOVE.

ACCESS TO PROPERTY:

- 8) With prior notice, the Member Club applicant agrees to allow access to its grounds to any USPA® representative for the purposes including, but not limited to, facility inspection, animal welfare inspection or drug testing, or review of PDI expenditures.

_____ INITIAL HERE TO INDICATE THAT, AS A DULY AUTHORIZED REPRESENTATIVE OF THE APPLICANT MEMBER CLUB, YOU HAVE READ, UNDERSTOOD, AND AGREE ON BEHALF OF THE MEMBER CLUB APPLICANT TO THE ACCESS TO PROPERTY REQUIREMENT SET FORTH ABOVE.

- 9) COMPLETE AGREEMENT AND SEVERABILITY CLAUSE: This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

COVID-19 PROTOCOLS FOR USPA MEMBER CLUBS

AS A CONDITION OF BEING A USPA MEMBER CLUB, YOU AGREE AS FOLLOWS:

1. You will review all applicable federal, state, county and local legal requirements regarding gatherings and activities during the ongoing COVID-19 pandemic (collectively, the "Legal Requirements") to determine whether polo tournaments, matches and/or practices (collectively, the "Polo Activities") are permitted under these Legal Requirements and under what circumstances before proceeding with any Polo Activities at your Club. IF YOU DETERMINE THAT SOME OR ALL POLO ACTIVITIES ARE PROHIBITED AT YOUR CLUB UNDER ANY OF THE APPLICABLE LEGAL REQUIREMENTS, YOU SHALL NOT PERMIT ANY SUCH POLO ACTIVITIES AT YOUR CLUB.
2. YOU WILL REGULARLY MONITOR THE APPLICABLE LEGAL REQUIREMENTS FOR UPDATES THERETO AND WILL COMPLY WITH SAID LEGAL REQUIREMENTS AT ALL TIMES.
3. YOU WILL REQUIRE THAT ALL PLAYERS, TEAM ORGANIZATIONAL STAFF, CLUB STAFF, GROOMS, COACHES, UMPIRES AND SPECTATORS (COLLECTIVELY, THE "PARTICIPANTS") ENGAGED IN POLO ACTIVITIES AT THE CLUB ABIDE BY THE LEGAL REQUIREMENTS AND YOU WILL ACTIVELY ENFORCE THESE POLICIES. YOU WILL REQUIRE COMPLIANCE WITH ANY ADDITIONAL MANDATORY SAFETY PROTOCOLS ISSUED BY THE USPA (THE "MANDATORY SAFETY PROTOCOLS") AND YOU WILL ACTIVELY ENFORCE THE SAME.
4. You will use your reasonable best efforts to enforce any recommended, but not mandatory, safety guidelines issued by the USPA from time-to-time (the "Safety Guidelines"). These Safety Guidelines are meant to supplement, but in no way to replace, the applicable Legal Requirements or Mandatory Safety Protocols.

_____ **INITIAL HERE TO INDICATE, AS DULY AUTHORIZED REPRESENTATIVE OF THE APPLICANT MEMBER CLUB, YOU HAVE READ, UNDERSTOOD, AND AGREE ON BEHALF OF THE MEMBER CLUB APPLICANT TO ADHERE TO AND ENFORCE THE COVID-19 PROTOCOLS SET FORTH ABOVE.**

REQUIRED SIGNATURE

By signing this Member Club Application and accepting the privileges of the USPA®, I (a) acknowledge that I have read, understand, accept and agree, on behalf of the Member Club applicant set forth below, that the Member Club applicant shall comply with and be bound by the terms of this Agreement and (b) confirm that I have been duly (1) appointed the Delegate of the Member Club named below and (2) authorized to execute and deliver this application on behalf of the Member Club named below.

Delegate's Signature: _____ Date: _____

Delegate's Name: _____

Member Club Name: _____

PAYMENT SECTION

Total \$ _____	Type of Payment: (US Funds ONLY) <input type="checkbox"/> Check # _____ <input type="checkbox"/> Credit Card** (Made out to USPA®)
----------------	--

* USPA® Membership fees are not deductible as a charitable contribution. **To pay via credit card please submit this form and call the USPA® Office.

FOR USPA USE ONLY

- | | |
|--|--|
| <input type="checkbox"/> Completed USPA Club Application
<input type="checkbox"/> Circuit Governor Approval
<input type="checkbox"/> Club and Membership Administration Committee Approval
<input type="checkbox"/> Copy of lease or proof of ownership
<input type="checkbox"/> Photographs of facility, fields, arena, barns, etc.
<input type="checkbox"/> Club Meets Membership Requirements
<input type="checkbox"/> Delegate Meets Delegate Requirements | <input type="checkbox"/> List of Officers
<input type="checkbox"/> Certificate of Insurance (\$1,000,000 General Liability with participant legal liability) naming USPA®, its subsidiary & affiliated companies, directors, governors, officers, trustees, agents, employees, servants and volunteers as additional insureds |
|--|--|

APPROVALS (attach all electronic approvals to this application)

Circuit Governor Signature: _____ Club and Member Administration Committee Approval Date: _____

Circuit Governor Approval Date: _____ Executive Committee Approval Date: _____