## Maine Association of Livestock Exhibitors – Membership Application July 1, 2023 – June 30, 2024

#### **RETURN CHECK FEE -** \$35.00

We do not accept memberships under a business name. Check can be made payable to: Maine Association of Livestock Exhibitors (MALE) and mailed c/o Kathleen Pride, 830 Cape Road, Limington, Maine 04049

Board member use only. Dat emailedhand deliv	-	(	Card sent by:USPS
Amount Paid:	Check #	Cash	
Valid ONLY when signed by MA	ALE Board Member		
Signature of Board Member	<del></del>	Date	Time AM / PM

#### **Board of Directors of the Association**

President-Diane Gushee V. President-Stan Moreau Treasurer-Carol Davis Secretary- Cindy Kilgore Board Members: Blaine Moon, Bill Webster, Ronnie Simpson, Garrett Lambert, Sarah Rowe, Meg Kelley, Kelsey Sanborn, Amy White, Karen Mushrow Strout, Kathleen Pride

Clarification of the liability insurance policy; no changes since the start of this Association. Coverage limit \$1,000,000.

The liability insurance policy is a **Display and Exhibitors** policy.

Therefore, the following activities are **NOT INCLUDED OR COVERED**.

- Equine racing, barrel racing, poles, jumping, steeple chase, rodeos, team penning
- Any and all Ox, steer, pony and horse rides, wagon, sleigh and hay rides.
- Any and all timed and pulling events.
- Dogs and sheep dog activities
- Vendors
- Subject to policy conditions.

### Members will be covered with the liability benefit at the following events:

Maine Fairs: Houlton, Ossipee Valley, Waterford World's Fair, Pittston, Bangor, Northern Maine, Monmouth, Topsham, Skowhegan, Union, Dover-Foxcroft, Acton, Windsor, Blue Hill Springfield, Harmony, Clinton Lions, Litchfield, Oxford, New Portland, Farmington, Common Ground, Cumberland, Fryeburg, Washington County. Other livestock events included: National Belted Galloway, Fryeburg Youth Show, Northeast Livestock Expo, Fiber Frolic.

The liability benefit does NOT cover at any other fair or event than those listed above.

Please see our website – <u>www.mainelivestockexhibitors.org</u> for more information or if you wish to join on-line.

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Please print and fill out completely. Incomplete information or illegible writing may cause delays. Read coverage clarifications before signing.

Name		
	middle initial Last na	me Date of birth
The primary member must be age 1	8 or older.	
Spouse		
First name	Last name	Date of birth
Children		
		<del></del>
Children listed on this form must be	tax dependent residents o	f your household and under the age of
18. Over 18, must have their own m	-	
Mailing address of primary member	•	
Maining address of primary member	•	
Street		
Town:	State:	Zip code:
Contact info:		
Home phone:	Cell phone:	
Email:		
Animals exhibited: ie Beef, Dairy, S commodities exhibited. <i>Please see</i>		
Membership Type Requested:		
Family \$50.00 includes hea	d of household, spouse, ar	nd/or children who are under age 18 and
permanent residents of the househo	• •	ia, or ormater who are ander age to and
	son 18 years of age or olde	r, even if dependents and resident of
household.	New	Renewal
		Kenena
I am stating the above information is	correct and I have read co	verage clarifications.
Signature of primary member.		Date