Maxwell Hall Park Equestrian Area Annual Membership Application

Name	Date o	f Birth	
Address:			
Phone number: (Work) Email address:	(Home	e/Cell)	
Please list other family mer Names/Date of birth	nbers:		
	// /		
	/ /		
Number of horses/ ponies: * A copy of a current negative horses not listed above, pleasinegative coggins is required.	#	horse/pony. If you plan of least 5 days in advance.	n transporting any A copy of a current
Tow Vehicle Information Make/ Model:	Color:	Tag#	
Trailer(s) Information	/		
	, please include a copy of vehicle regis		
	n date processed and will expire 12/31 at this membership applies to this veh		ll park rules and
Signature of Applicant:	Date:		
Make all checks payable to: C	Charles County Dept. of Recreation, Pa	rks and Tourism (C.C.D.R.I	?. T.)
Please mail this application and Gilbert Run Park Office Attn: Maxwell Hall Park 13140 Charles St. Charlotte Hall, MD. 20622	nd membership fee (\$25 Charles Count	y Resident, <mark>\$35</mark> Non-County	Resident) to:
Applications will be processed in a	approximately 7-10 business days		
Office Use Only:			
Sticker # Date Is	ssued Employee Signatu	re	