

Membership #:	
Date Received: _	
Paid Check #:	

Membership Application for Show Year 2020

To be eligible for YEAR-END HIGH SCORE AWARDS, All three entities- the owner/lessee, rider and animal must be recorded.

Individual Membership				
Name of Horse or Pony:				
Breed:		Foaling Date:		
Color:			Height:	Sex:
Name Change :	Home Phone:			
Name Change: \$.	5.00 List horse/pony prev	vious name:		
Lifetime Recordii	ng: \$15.00			
Change of Owne	r: \$15.00			
certify that the informatio		nd that I am the Ov	ner/Lessee of	record.
Signature of Owner/Lessee:				
Address:				
City:	State:	Zip:		
Contact:	Phone	:		