

ALOHA STATE DRESSAGE SOCIETY

2017 ASDS MEMBERSHIP APPLICATION (Valid 12/01/16 through 11/30/17)

THIS ORGANIZATION IS A USDF GROUP MEMBER ORGANIZATION.

ASDS MEMBERS ARE AUTOMATICALLY USDF GROUP MEMBERS

and will receive a USDF GMO membership card.

MEMBERSHIP FEES: All riders and owners (or lessees) of horses participating in ASDS sponsored events **must** be current ASDS members.

\$60.00 Individual (*Senior*)

\$250.00 Individual (*Senior*) **5-Year Membership**

\$40.00 Individual (*Junior*) (\$10 discount for *Pony Club Members of any age regardless of sign-up date*)

HORSE REGISTRATION FEES: Horses **must** be registered with ASDS to be eligible for participation in championship and year-end awards programs.

\$20.00 Annual (*Per Horse*)

\$75.00 Lifetime (*Per Horse; for the life of the horse*)

\$10.00 Registration transfer (*Transfers ASDS horse registration from previous owner to new owner*)

TO ENSURE PROMPT RETURN OF YOUR 2017 MEMBERSHIP CARD, SEND A SELF ADDRESSED STAMPED ENVELOPE WITH THIS APPLICATION.

Make Checks Payable to ASDS and mail to:

PO Box 6494, Kaneohe, HI 96744

Non-Pony Club Members: SAVE \$5.00 ON INDIVIDUAL MEMBERSHIP BY RENEWING YOUR MEMBERSHIP BEFORE NOVEMBER 30, 2016.

Joining in October 2016 will extend your membership through the 2017 membership year.

MEMBERSHIP APPLICATION: (Please use a separate form for each member)

Name: _____ JR/YR _____ Adult _____ Current ASDS No: _____

Address: _____
Street City ST ZIP

Phone: _____
Home Work FAX email address

Birth date: If under 21 or Vintage: _____ USEF No: _____ USDF No: _____

Member Signature: _____ Application Date: _____

Signature of Parent if under 18 years: _____

HORSE REGISTRATION: (Please use a separate form for each horse. Complete if this is a new horse, annual registration or upgrading to Lifetime). If horse is already Lifetime, leave blank.

Registration (circle) **Life** **Annual** ASDS # _____ If Transfer, Name of Previous Owner: _____

Horse's Name: _____ Breed: _____

Age: _____ Sex: _____ Color: _____ Markings: _____

Owner or Lessee (Please check one box; if Lessee, please attach a copy of the written lease agreement for this horse. If written agreement is not available, the horse's owner must be a current member of ASDS)

Name of Owner/Lessee: _____ Horse's USDF No: _____

FEES: Membership \$ _____ + Horse Registration: \$ _____ + Donation \$ _____ = \$ _____
Required If applicable Volunteer Total Fees Enclosed

VOLUNTEERING: Please get involved! Contact the show manager or any ASDS Board member. Check our website:
alohastatedressage.com