

# 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](http://alohastatedressage.com)