

ALOHA STATE DRESSAGE SOCIETY

2026 ASDS MEMBERSHIP APPLICATION (Valid 12/01/25 through 11/30/26)

THIS ORGANIZATION IS A USDF GROUP MEMBER ORGANIZATION.

ASDS MEMBERS ARE AUTOMATICALLY USDF GROUP MEMBERS

and will receive a USDF GMO membership card. Exception: Affiliate Members

MEMBERSHIP FEES: All riders and owners (or lessees) of horses participating in ASDS sponsored events must be current ASDS members to be eligible for participation in ASDS year-end awards programs.

\$250.00 Individual (*Adult*) **5-Year Membership**
\$60.00 Individual (*Adult*) (\$10 discount for Pony Club Members)
\$40.00 Individual (*Junior-18 years and under*) (\$10 discount for Pony Club Members)

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

\$75.00 Lifetime (*Per Horse; for the life of the horse*)
\$20.00 Annual (*Per Horse*)
\$10.00 Registration transfer (*Transfers ASDS horse registration from previous owner to new owner*)

TO ENSURE PROMPT RETURN OF YOUR 2026 MEMBERSHIP, SEND A SELF-ADDRESSED STAMPED ENVELOPE WITH THIS APPLICATION.

Make Checks Payable to ASDS and mail to: PO Box 342, Kailua, HI 96734

Joining in October 2025 will extend your membership through the 2026 membership year.

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

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

Address: _____
Street City State Zip

Phone: _____
Home Work Cell Email Address

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

Member Signature: _____ Application Date: _____

Signature of Parent if under 18 years: _____

Please check if you DO NOT want to share your contact information on the ASDS membership list _____

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 (check one) 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 Voluntary Total Fees Enclosed

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