

# MAINE HORSE ASSOCIATION, INC.

## MEMBERSHIP APPLICATION **2021**

[www.mainehorseassoc.com](http://www.mainehorseassoc.com)

RETURN TO MHA ADMINISTRATOR: **Dollie Hutchins, 9 Bauneg Beg Rd, Sanford, ME 04073**

<b>TYPE OF MEMBERSHIP</b> <input type="checkbox"/> NEW <input type="checkbox"/> RENEWAL	<b>FAMILY:</b> _____ \$35.00 Family includes all children aged 17 & under (please list names & ages below) <b>INDIVIDUAL:</b> _____ \$30.00 <b>INDIVIDUAL LIFE:</b> _____ \$250.00
<b>REQUIRED INFORMATION</b>	NAME: _____ SPOUSE: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ TELEPHONE: _____ CELL PHONE: _____ Names and Birth dates of all children 17 & Under 1. _____ dob: _____ 2. _____ dob: _____ 3. _____ dob: _____ 4. _____ dob: _____
<b>EMAIL INFORMATION</b>	E-mail Address ~~ <b>PLEASE PRINT CLEARLY</b> _____ <b>MHA uses email as official news and notifications of meetings and shows.</b> It is the responsibility of members to make sure the MHA Secretary has your updated email address.
<b>AMATEUR CERTIFICATION</b>	MHA requires proof of amateur status (for certain horse show classes) as defined in the current USEF Rule Book. <b>I do NOT hold current USEF or NEHC amateur credentials.</b> Please send MHA Amateur Certification for the following Adult MHA Members. 1. _____ 2. _____ Signature _____ <small>(required for each Amateur Applicant)</small>
<b>HORSE SHOW PRIZE LISTS</b>	→ I wish to receive the following types of <i>HORSE SHOW</i> prize lists: All <input type="checkbox"/> ; Pleasure Ring/Open Only <input type="checkbox"/> ; Hunter/Jumper Only <input type="checkbox"/> ; None <input type="checkbox"/>
<b>I plan to participate in</b> ____ <b>FAMILY PLEASURE HORSE PROGRAM**</b> (Certificate Program) ____ <b>DRESSAGE PROGRAM**</b> (High Score Awards) ____ <b>TRAIL RIDE PROGRAM**</b> (High Mileage Awards)  **Trail/Pleasure Logs & Dressage Show Score Forms are available on the website: <a href="http://mainehorseassoc.com">mainehorseassoc.com</a>	<b>PAYMENT OPTIONS:</b> ____ <b>Enclosed is my CHECK for</b> _____ (Made out to MAINE HORSE ASSOCIATION)  <b>To pay by CREDIT CARD, please fill out the information below</b> ____ Discover ____ American Express ____ Visa ____ Mastercard <b>Card Number:</b> _____ <b>Expiration Date:</b> ____ / ____ <b>C V V #:</b> _____  Membership Fee Total _____ <b>Authorization Signature:</b> _____  Credit Card Info will be destroyed after bank deposit is made.
____ <b>CASH Amt.</b> _____ ____ <b>MONEY ORDER Amt</b> _____	