

MSEDA

_____ **New** _____ **Renewal**

Please print, type or write legibly.

MEMBERSHIP INFORMATION

Name:	Birth Date :	JR	SR
Street:	City/State/Zip:		
Phone: (Home)	E-mail:		
(Cell)	E-mail:		
MSEDA # (if applicable):			

FAMILY MEMBERS (if applying for family membership)

Name:	Birth Date:
Name:	Birth Date:
Name:	Birth Date:

Family member definition: "Any family body of two or more individuals whose interest is related or similar to that of MSEDA and which pays dues as prescribed by the Board of Directors" Article III 1.1 (b)

HORSE ACTIVATION (to be eligible for year-end awards all horse/rider combinations must be activated)

Name of Horse/ Owner:	Sex:
Name of Horse/Owner:	Sex:
Name of Horse/Owner:	Sex:
Name of Horse/Owner:	Sex:

You may activate up to 8 horses. Please submit additional names on another sheet. There is a **\$10** activation fee per horse for horses **activated after March 1, 2016**.

MEMBERSHIP FEES ENCLOSED

_____ \$50 Individual Basic Membership	Credit Card: VISA / MC / AmEx / Discover
_____ +\$5 Per family member (as listed above)	Credit CardNumber: _____
_____ +\$10 Per Horse (after March 1)	Exp: _____ CVC: _____
_____ TOTAL FEES ENCLOSED	<i>There is a \$2 fee for use of the credit card.</i>
(Make checks payable to: MSEDA)	

This form must be filled out completely and submitted to the MSEDA Secretary in order to maintain or activate your membership. When completed, enclose the appropriate fees and mail to:

RACHEL HENSON
606 Brown Ave.
Shelbyville, KY 40065

E-mail: rachelmseda@gmail.com
Phone: 502-594-9720