

MSEDA

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

Please print, type or write legibly.

MEMBERSHIP INFORMATION

Name:	Birth Date : Junior/Senior/Master
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, 2019**.

MEMBERSHIP FEES ENCLOSED

<p>_____ \$25 Collegiate Membership**</p> <p>_____ \$50 Individual Basic Membership</p> <p>_____ +\$5 Per family member (as listed above)</p> <p>_____ +\$10 Per Horse (after March 1)</p> <p>_____ TOTAL FEES ENCLOSED</p> <p style="text-align: center;">(Make checks payable to: MSEDA)</p>	<p>Credit Card: VISA / MC / AmEx / Discover</p> <p>Credit Card #: _____</p> <p>Exp: _____ CVC: _____</p> <p style="text-align: center;"><i>There is a \$2 fee for use of the credit card.</i></p>
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****Collegiate Member** must be currently enrolled in a college/university. Please provide copy of student card as proof.

This form must be filled out completely and submitted to the MSEDA in order to maintain or activate your membership. When completed, enclose the appropriate fees and mail to: MSEDA, P.O.Box 338, Georgetown, KY 40324

Questions? Email: theadmin@mseda.org