Show Office Approval Date:
----------------------------

Received Payment: _	
---------------------	--

## <u>2022- Above The Standard Show Series – Membership Form</u>

RIDER'S FULL NAME:	RIDER'S D.O.B:
MAILING ADDRESS:	
PHONE NUMBER:	EMAIL ADDRESS:
TRAINER NAME:	TRAINER NUMBER:  TUS (CIRCLE ONE): JUNIOR AMATEUR PROFESSIONAL
HORSE'S NAME:	(CIRCLE ONE) HORSE or PONY (S M L)
HORSE'S OWNER:	
	RDS SERIES END PRIZES & RIBBONS? YES OF NO AMOUNT:  MEMBERSHIP PAID BY (CIRCLE ONE) CASH - CHECK# VENMO - PAYPAL
SIGNATURE:	DATE: