## **MDPH Show Series Year End Award Membership**

Each year end eligible exhibitor must have a **membership and nomination** on file **Points begin from date Membership & Nomination is paid - Horse/Rider Combo Per Series** 

Leadline Membership Exhibitors jus				ıst doing lead	\$25			
Open Show Membership Small fry/Beginner/Youth/Adult/Open /Ranch					\$50			
Nominatio	on or Sponsorship			•	points nomination	\$50		
Membe	er Informa	tion						
Signature				Division(s)			Date	
Last Name				First Name				
Email Addr	ess					Date of Birth	1	
Street Addı	ress					l		
City		:	State			Zip		
Contact Nu	ımber				Jacket Size			
	le for keeping						season. Exhibitor vailable at the sho	
Leadline	Small Fry	Beginner	Variable				Dack #	
			Youth	Adult	Open	Ranc		
#2 Horse N	lame		Youth	Adult	Open Sheet Size	Ranc		
	Iame Small Fry	Beginner	Youth	Adult			h Back#	
#2 Horse N Leadline #3 Horse N	Small Fry	Beginner			Sheet Size	Age	h Back#	
	Small Fry	Beginner Beginner			Sheet Size Open	Age	h Back#	
Leadline #3 Horse N Leadline	Small Fry Jame	Beginner	Youth	Adult	Sheet Size  Open  Sheet Size  Open	Age Rand	h Back#	
Leadline #3 Horse N Leadline  Total Amo	Small Fry  Jame  Small Fry	Beginner	Youth	Adult  Adult  PAID V	Sheet Size  Open  Sheet Size  Open	Age Rand	h Back#	

Date:

Office use only

Received by:

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Buckle Series Show Membership	Peewee, youth, walk trot, Adult	\$50
Leadline Only Membership	Exhibitors just doing lead line	\$25
Nomination or Sponsorship	Each exhibitor/horse combo points nomination that covers ALL divisions. Can replace with a sponsorship.	\$50

## **Member Information**

Signature		Division(s)			Date
Last Name		First Name			
Email Address				Date of Birth	1
Street Address					
City	State			Zip	
Contact Number			Jacket Size		

## **Horse Information**

#1 Horse Na	me				She	eet Size	Age	
Leadline	Walk Trot	Pee Wee	Youth	Adult				
#2 Horse Nar	me				She	eet Size	Age	
Leadline	Walk Trot	Pee Wee	Youth	Adult				
#3 Horse Nar	ne				She	eet Size	Age	
Leadline	Walk Trot	Pee Wee	Youth	Adult				

Paying by Check needs License number on file #	Total Amount Due \$	PAID VIA	CASH	VENMO	CHECK #	
	Paying by Check needs License number o	n file #				

Memberships can be mailed to MDPH P.O. Box 26 Martins Creek, PA 18063

Office use only	Received by:	Date: