



Southern New England Saddlebred Association, Inc. (SNESA) Membership Application 2019

Name:		
Address:		
City/State:		
Zip Code:		
Email Address:		
Phone Number:		
New or Renewal?	New <input type="checkbox"/>	Renewal <input type="checkbox"/>
Membership Type:	<input type="checkbox"/> Farm \$35 (1 Year)	<input type="checkbox"/> \$70 (2 Year)
	<input type="checkbox"/> Senior \$30 (1 Year)	<input type="checkbox"/> \$50 (2 Year)
Junior Membership: Date of Birth (required)	<input type="checkbox"/> Junior \$20 (1 Year)	<input type="checkbox"/> \$30 (2 Year)
Family Membership: List names here:	<input type="checkbox"/> Family \$35 (1 Year)	<input type="checkbox"/> \$70 (2 Year)
Are you a current ASHA member?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Would you like to donate to Saddlebred Rescue? If so, please increase payment by desired amount	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Please list any/all horses you own/will be showing:		

PAY VIA PAYPAL: snesa.saddlebred@gmail.com (choose send money to family/friends)

Please include in memo: Name/Barn/Address/Phone Number

CHECKS: make payable to SNESA, and mail check and application to:

SNESA
Attn: Pamela Maynard/Membership
42 Main Street
East Hampton, CT 06424

For additional information, please email snesa.saddlebred@gmail.com or visit our website at www.snesaddlebred.com

Promoting The American Saddlebred!

Club Use Only:

Member Number Assigned: _____ **Date Joined:** _____