

2010

Idaho State Horse Show Association Membership Application

Also available at www.ishsa.com



Date: _____ I want points tracked _____

Individual (\$20.00) _____ Family (\$25.00) _____ Renewal _____ New _____

Name of Primary Member _____

Address: _____ City _____ State _____ Zip _____

Home Phone Number _____ Birth date if Primary Member is under 18 _____

E-Mail Address: _____

Names of additional family members, birth dates (if under 18) and relationship to primary member (same household only):

1. _____ 2. _____

3. _____ 4. _____

By signing, I hereby agree to follow the rules and procedures set up by the Idaho State Horse Show Association.

Signature: _____

This information is important for year end awards, please print clearly. New horses can be added on later.

Horses Registered Name	Nickname	Registration Number or Grade	Breed	Sex	Age	Owned by Member Yes/No**

**If you marked NO under the "Owned by Member" column, please list owners name and address:

Name: _____ Address _____ City _____ State _____ Zip Code _____

REMEMBER: Horses must be shown under the Registered Name above or the Point Secretary cannot keep track of who you are. Also, under ISHSA rules, *both owner and exhibitor* of the equine must be a current ISHSA member for points to count. You must show unregistered equines in the "All Other Classes" even if you know the breed.

Please Return This Form To:

Barbara Crawford
5025 W. Valle Grande
Meridian, ID 83642

Payment must accompany application

Membership Paid: \$ _____

Rule Book Paid: \$ _____

Date Paid: _____

Cash/Check Number: _____

Membership Type: IND - FAM