Hawaii Horse Show Association ● 2010 Membership Application
Valid January 1, 2010 to December 31, 2010

MEMBERSHIP FEES: The HHSA membership year begins on January 1. All memberships (except Life) expire on December 31. The effective date of membership will be the date when both the application and the correct fees are received by the HHSA office. Both Rider and Horse Owner/Lessee must be current members of HHSA to be eligible for HHSA year-end performance awards. Equitation classes require only that the rider be a current member.

$40 Individual (*Senior*)	$35 Individual (*Junior*)
$25 Pony Club	$60 Family Membership
$60 Contributing Member	$200 Life Member

Primary area of interest:
English ___ Western ___ both ____

Please check here if Adult Amateur _____18–35 yrs_____ over 35 yrs _____

HORSE REGISTRATION FEES: Horse must be registered for rider to be eligible for HHSA year-end performance awards.

$30 Annual (*per horse*) $100 Lifetime (*per horse; for life of the horse*) $10 Name change/Ownership transfer

MEMBERSHIP APPLICATION (*Please use a separate form for each application*)

Type of membership: _____ Current HHSA Membership No.: _____

Name: _____

Address: _____
street city state zip

Phone: _____
home work cell fax

Birthdate, if under 18 years old: _____ Email: _____

Signature _____ Application date: _____
signature of parent or guardian if under 18 years old

Names, ages, and birthdates of addition family members if applying for Family membership: _____

_____

_____

_____

HORSE REGISTRATION (*Please use a separate form for each horse*)

Type of registration: _____ If transfer, name of previous owner: _____

Horse's name: _____ Breed: _____

Year of birth: _____ Sex: _____ Color: _____ Markings: _____

Owner or Lessee (*Please circle one. If Lessee, please attach a copy of the written lease agreement for this horse. If no written agreement is available, the horse's owner must be a current member of HHSA*.)

Recorded owner of horse: _____ Horse's previous HHSA number: _____

Owner's address: _____
street city state zip

Owner's phone: _____
home work cell fax

Owner's birthdate, if under 18 years old: _____ Email: _____

Owner's signature _____ Application date: _____
signature of parent or guardian if under 18 years old

FEES (*Please refer to the schedule above*)

Membership	_____
Horse registration	_____
Name change/Ownership transfer	_____
Donation	_____
TOTAL FEES ENCLOSED	_____

Make checks payable to HHSA and mail to:
Sidney Westley
177 Ohana Street
Kailua HI 96734

Volunteer Requirement: In order to qualify for year-end awards in 2009, all HHSA members are required to fulfill a minimum of 4 hours of volunteer work during the show season. This requirement may be fulfilled by a family member for participants under 14 years old.