

2019 MEMBERSHIP APPLICATION

17631 82nd Way No. Maple Grove MN 55311 Please Mail To: Betsy Kieffer New Renew If this is a renewal and the 2018 information Is correct continue to Membership Type. **CORRECTIONS OR IF NEW, COMPLETE:** Name **Address** Age or >50 as of 12/1/18 Home # Cell# **Email** Farm (if horse owned by farm) If under age 18 list name of parent or guardian Memberships run from December 1 to November 30, the same as USEF and USHJA. It becomes active on the postmark date if mailed, or date received by a representative of the MHJA, if hand delivered. All memberships expire on November 30, regardless of the date activated. If you have not renewed or joined by March 1, 2019, you will not receive mailings until you renew, and you will not be listed in the 2019 directory. It is the member's responsibility to make sure all the membership requirements are met for award eligibility. CHECK **Amount** Membership Definition HERE Due Type Receives all publications and prize lists, is listed in the directory, may participate in MHJA Clinics as a member, and all other regular member \Box \$60.00 Individual benefits. Competing Member and all horses owned by the Competing COMPETING Member will be eligible for MHJA Year-End Awards. For hunter or jumper classes, the owner of the horse must be a MHJA Competing Member. If you are riding a horse owned by someone else, for points to count, the owner must also be a MHJA Competing Member. For equitation the rider must be an MHJA Competing Member. Individual Receives all publications and prize lists, is listed in the directory and \$40.00 SUSTAINING eligible for all other regular benefits. The Non-Competing Membership (Nondoes not include eligibility for MHJA Year-End Awards. Competing) TRAINERS / FARM OWNERS: to be included in the online stable map Horsemen's \$40.00 and newsletter. Ad Insertion Order form and payment MUST BE Directory RECEIVED BY Dec. 31, 2018 to be included in the Directory. Discount Pay by December 31, 2018 and take \$5.00 off your membership - \$5.00 **TOTAL DUE Check Payable to MHJA** MHJA ☐ I have multiple memberships at one address and would like to receive only one mailing / email. ☐ I do not want my information to be included in the MHJA Directory. ☐ I am interested in VOLUNTEERING to help with MHJA events. I AUTHORIZE THE ABOVE INFORMATION IS CORRECT: ____