

# MeBRA MEMBERSHIP APPLICATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Horse's Name: \_\_\_\_\_ Show #: \_\_\_\_\_  
2<sup>nd</sup> Family Member Name: \_\_\_\_\_  
Horse's Name: \_\_\_\_\_ Show #: \_\_\_\_\_  
3<sup>rd</sup> Family Member Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Horse's Name: \_\_\_\_\_ Show #: \_\_\_\_\_  
4<sup>th</sup> Family Member Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Horse's Name: \_\_\_\_\_ Show #: \_\_\_\_\_  
(Include date of birth after Junior and Pee Wee names.)  
Mailing Address: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

PLEASE PUT YOUR INITIALS NEXT TO THE CATEGORIES YOU PLAN TO COMPETE IN.

BARRELS: Green \_\_\_\_\_ Novice \_\_\_\_\_ MeBRA \_\_\_\_\_ Junior \_\_\_\_\_ PeeWee \_\_\_\_\_

POLES: Green \_\_\_\_\_ Novice \_\_\_\_\_ Senior \_\_\_\_\_ Junior \_\_\_\_\_ PeeWee \_\_\_\_\_

Note: 2 year limit on Novice and Green classes.

Each number is assigned to a specific horse and can only be used with that horse. If you wish to have a number reassigned to another horse please indicate on this application or inform the show secretary prior to the show season. Use your name and horse's name as it appears on the membership application. Members are responsible for remembering their own numbers. If you do not use the names as shown on the membership application (with your assigned number) for the entire show season, the club will not be responsible for any misapplied points. Points will not be adjusted for errors of this type.

Sponsors (page 8 of by-laws) to be eligible for year end awards minimum \$30 \_\_\_\_\_

Awards Information: If you are fortunate enough to qualify for an award at the end of the show season, we would like the following information to help the Awards Committee select an appropriate award for you.

Although you are not guaranteed the award of your choice, the Committee will do it's best to select something as close as possible, within budget allowances.

Would you prefer a trophy: Yes \_\_\_\_\_ No \_\_\_\_\_

Would you prefer equipment: Yes \_\_\_\_\_ No \_\_\_\_\_ Color(s): \_\_\_\_\_

Comments or Suggestions: \_\_\_\_\_

I hereby promise to honor all rules and by-laws of the MeBRA and to be a member in good standing. I realize that failure to do so, in any way, can subject my membership to forfeiture.

Signature of member: \_\_\_\_\_

\_\_\_\_\_ Individual Membership \$25.

\_\_\_\_\_ Family Membership (for 2 members please enclose \$35. Add \$5 for each additional family member—must be living in the same household (only parents and children, husband and wife)

Mail to: Paula Charette, 147 Warren Road, Monmouth, ME 04259