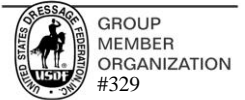




# Dancing Horse Dressage & C.T.



## Membership Application

(Year)

Dancing Horse Dressage & C.T. is a USDF Group Member Organization.

Its Single members are automatically USDF Group Members.

Date: \_\_\_\_\_

### SECTION 1: PRIMARY MEMBER CONTACT INFORMATION

(Please complete ALL information)

NAME		USDF #	
ADDRESS		DATE OF BIRTH	
CITY,STATE,ZIP		HOME PHONE	
EMAIL		MOBILE PHONE	

### SECTION 2: MEMBERSHIP TYPE

MEMBER TYPE	DESCRIPTION	FEE
SINGLE	Full Membership	\$45
ADD'L FAMILY MEMBERS	Requires Full Membership for Primary Member PLUS \$20 per additional family member. Add'l Name: _____	\$20 each add'l
	DOB: _____ USDF #: _____ Email: _____ Add'l Name: _____	
	DOB: _____ USDF #: _____ Email: _____	
YOUTH	Parent/Guardian Name: _____ Phone Number: _____ Email: _____	\$30
TRAINER	To qualify must show in 'open' division and can not hold an 'amateur' rating with USEF/USDF	\$30
		<b>TOTAL FEE</b>

### SECTION 3: PHOTO/AUDIO AUTHORIZATION AND RELEASE

I hereby authorize DHD & C.T. or their assignees to record and photograph my image and/or voice (or that of my child if under 18). I further consent to and permit photographs of me and/or those of my minor children to be used by DHD & C.T. for any purpose and in any medium. I understand that DHD & C.T. may use such photographs with or without associating names thereto. I further waive any claim for compensation of any kind for DHD & C.T.'s use or publication of photographs of me and/or those of my minor children (if applicable)

### SECTION 4: ADDITIONAL INFORMATION

- Yes, add the primary member email address to the DHD Member Email List.
- Yes, add any additional family member's email addresses to the DHD Member Email List.

### SECTION 5: SIGNATURES

PRIMARY MEMBER SIGNATURE		DATE	
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### PARENTAL CONSENT IF PRIMARY MEMBER IS A YOUTH UNDER 18

I hereby certify that I am the parent/guardian of the primary applicant, have read this document, and I understand and agree to its content.

SIGNED		RELATIONSHIP		DATE	
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Please make checks payable to DHD & C.T.  
**Send your membership application and payment to:**  
**Gloria Lawless, 205 Riley Ave NE, Palm Bay, FL 32907**