



Great Lakes Dressage Club Membership Application

Name _____ Date _____

Additional Family Members _____

Address _____

City/State/Zip Code _____

Phone _____

E-mail _____

Membership is from January to December.
For those who join after August 1st, these rates will include next year's membership.

- New Renewal
 Individual Membership \$20 Family Membership \$30

Check payable to: Great Lakes Dressage Club
Mail to:
Karen Miller
5691 County Road 1-2
Swanton, OH 43558

When we welcome you in our newsletter, we would like to tell our members a little about you and your horses, interests in dressage, level of riding, etc. Please use the space below to tell us about yourself, or for any other comments on what you would enjoy doing with the club. Feel free to use the reverse side of this application if there's not enough room.

Do you ride for: Pleasure Show Trail Jumping Other/Specify _____

Do you give lessons? Yes No Do you train horses? Yes No

Do you give lectures, clinics or demonstrations? Yes No What is your expertise? _____

Are you a qualified judge? Yes No Can you hold a meeting in your home or barn? Yes No

Are you able to serve on a committee? Yes No Are you able to chair a committee? Yes No

What kinds of clinics are you interested in? _____

Suggestions for meeting programs: _____

Are you over 20 years old? Yes__ No__ If no, what is your date of birth? _____

Under 18 ? Parent signature to participate _____