



# Great Lakes Dressage Club 2008 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 1<sup>st</sup>, these rates will include next year's membership.

**Check payable to: Great Lakes Dressage Club  
Mail to:  
Dawn Wagstaff  
13621 Macon Road  
Saline, Michigan 48176  
734-944-9350**

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

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: \_\_\_\_\_

**Thank you for taking the time to fill out this form!**