

Hawaii Horse Show Association 2018 Membership Application

Valid 1 January to 31 December 2018

The HHSA membership year begins on January 1. All memberships (except Life) expire on December 31. The effective date of membership will be the date when both the application and the correct fees are received by the HHSA office. Both Rider and Horse Owner/Lessee must be current members of HHSA to be eligible for HHSA year-end performance awards. Equitation classes require only that the rider be a current member.

MEMBERSHIP FEES: (Circle one)

\$40 Individual (*Senior*) **\$35** Individual (*Junior*) **\$25** Pony Club (*18 & under*) **\$60** Family Membership/Contributing Member **\$200** Life Member

Primary area of interest: ENGLISH ___ WESTERN ___ BOTH ___

HORSE REGISTRATION FEES: (Circle all that apply) Horse must be registered to be eligible for HHSA year-end performance awards.

\$30 Annual (*Per Horse*) **\$100** Lifetime (*Per Horse; Life of Horse*) **\$10** Name change / Ownership Transfer

MEMBERSHIP APPLICATION (Please use a separate form for each application)

NAME _____ Type of Membership _____

ADDRESS _____

EMAIL _____ PHONE _____

BIRTHDATE _____

CURRENT HHSA MEMBERSHIP NUMBER _____

Check here if Adult Amateur _____ 18-35 yrs _____ over 35 years _____

NOTE: Must have current USEF/USHJA Amateur Certification to show in amateur division

Signature of parent or guardian if member is under 18 years

IF FAMILY MEMBERSHIP list names, ages, and birthdates of additional family members below (if additional space required use back of sheet)

HORSE REGISTRATION (Please use a separate form for each horse)

Type of registration _____ If transfer, name of previous owner _____

Horse's Name _____ Breed _____

Year of birth _____ Sex _____ Color _____ Markings _____

Owner / Lessee (circle one)

(If lessee, please attach a copy of the written lease agreement for this horse. If no written agreement is available, the horse's owner must be a member of HHSA)

Recorded Owner of Horse _____ Horse's previous HHSA number _____

Owner's Address _____

Owner's email _____ Owner's phone _____

Owner's birth date, if under 18 years old _____

Owner's signature _____

(Parent or guardian signature if under 18 years old)

FEES: (Please refer to the schedule above)

Make check out to **HHSA** and mail form and fees to: **HAWAII HORSE SHOW ASSOCIATION**

Membership _____ **P.O. BOX 2559**
Horse Registration _____ **HONOLULU, HAWAII 96804**

Name Change/ Ownership transfer _____

Donation _____

Total Enclosed _____ or **CIRCLE IF PAYING VIA PAYPAL/VENMO**

If paying by PayPal application may also be filled out and emailed to: hhsainformation@gmail.com

Volunteer Requirement: In order to qualify for year-end awards all HHSA members are required to fulfill a minimum of 6 hours of volunteer work during the show season. This requirement may be fulfilled by a family member for participants under 14 years old.