



2018 Membership Form

Membership Fees

- ____ Member (New) \$30.00
- ____ Member (Renewal) \$25.00
- ____ Family (New) \$40.00
- ____ Family (Renewal) \$35.00

Name(s): _____ Horse's Name: _____
 Points Divisions: _____ Exhibitor Number: _____
 Address: _____
 City, State, Zip: _____
 Phone: _____ Cell Phone (texts): _____
 Email: _____

Family Members

Rider Name: _____ If youth age: _____ Horse's Name: _____
 Points Divisions: _____ Exhibitor Number: _____
 Rider Name: _____ If youth age: _____ Horse's Name: _____
 Points Divisions: _____ Exhibitor Number: _____
 Rider Name: _____ If youth age: _____ Horse's Name: _____
 Points Divisions: _____ Exhibitor Number: _____
 Rider Name: _____ If youth age: _____ Horse's Name: _____
 Points Divisions: _____ Exhibitor Number: _____
 Rider Name: _____ If youth age: _____ Horse's Name: _____
 Points Divisions: _____ Exhibitor Number: _____

- The Rule Book is available at the entry both as well as online at our website theccwc.com
 - Membership allows discount on all class fees at CCWC shows
- Membership allows you to enjoy discounts at participating tack stores
 - Membership automatically signs you up for year-end awards

Year-End Awards Rules

- You will be assigned a number for each exhibitor/horse combo. May use your number from the previous year.
- All members are required to complete 2 hours of volunteer service to be eligible for Year End Awards
- All members must attend 4 out of 6 shows to be eligible for Year End Awards

Points Divisions

Mini Horse	Lead Line	Western A	Western B	Western W/T Y	English A
English B	English W/T Y	Adult Novice	Green Horse West	Green Horse English	Lead Line Speed
Speed W/T	Speed A	Novice Speed	Speed B	Speed Y	

Make checks payable to CCWC and remit to:

CCWC
 3087 Hooper Delight Rd.
 New Windsor, Md 21776

Age Groups:

Lead Line – 8 & Under	A - 18 & up	B – 17 & Under
Y – 13 & Under	W/T Y – 13 & Under	Novice 18 & up

By signing below you authorize and agree to let CCWC send you name and/or photos to local horse related magazines and papers as deemed necessary.

Name: _____ Date: _____

OFFICE ONLY

Amount Paid _____ Ck# /Cash _____ Initial _____

