

KITSAP SADDLE CLUB – 2021 MEMBERSHIP APPLICATION

Membership is from January 1st through December 31st

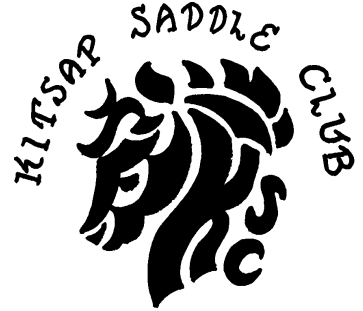
Mailing address: P. O. Box 1042, Port Orchard, WA 98366
 Physical address: 1470 Saddle Club Road, Port Orchard, WA 98366

www.thekitsapsaddleclub.org

\$70 Family membership consists of up to 2 adults and their children or legal dependents under 18 yrs. and/or through 23, enrolled full time in school and living in the same household.
ALL individuals over 18 must sign below.

\$55 Individual Membership any person 18 years or older. Those under 18 must join under the family membership.

\$25 "Silver Top" membership any individual of the age of 65 or older.



Last Name _____ PHONE (____) _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 EMAIL _____
 Print clearly

PLEASE NOTE: The Hoofbeats newsletter and other club notifications are ONLY sent via email.

- I am willing to assist with: **Buildings & Lands**
 Horse Shows
 Schooling Shows ("Playdays")
 Clinics
 Trail Rides / Prize Rides
 Parades
 Kitchen

I (We) agree to abide by the rules of the Kitsap Saddle Club as set forth in the Standing Rules and By Laws. Signature below constitutes a legal agreement to accept and abide by all By Laws, and authorizes the KSC Board Members to review and act accordingly to the display of any inappropriate acts or behavior at Club sanctioned activities.

Print _____ Signature _____ DOB _____
 Print _____ Signature _____ DOB _____
 Print _____ Signature _____ DOB _____
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 Print _____ Signature _____ DOB _____
 Print _____ Signature _____ DOB _____

The Kitsap Saddle Club is an affiliate of Washington State Horsemen.

Membership in the **Washington State Horsemen** is voluntary. If you wish to join WSH also please add \$31 for a Family, \$22 for an Individual membership or \$15 for a Youth (when joining without any other family member).

A member joining KSC under a Family membership can pay the WSH individual membership fee.

Type of Membership: **Family** **Individual** **Silver Top** **Lifetime Member**

New

Renewal

Kitsap Saddle Club Membership Dues _____

Washington State Horsemen Dues (optional) _____

TOTAL AMOUNT PAID _____

For office use only

Date Paid _____ Amount _____ Cash _____ Check # _____