



Cape Breton Western Riders Association

Membership Application Form



~ 2010 ~

PLEASE READ THESE NOTES BEFORE CONTINUING:

- This CBWR membership covers the period of January 01, 2010 to December 31, 2010.
- By submitting this form, you agree to abide by the rules and regulations of the CBWR
- You must be both a CBWR member and a NSEF member in order to compete at CBWR shows.
- Membership fees must be received *before the end of the first show of the season* in order to qualify for year-end awards. **Please note that the owner of the horse must be a member before the May show in order to collect points on that horse.
- Members, and only members, have the right to propose and/or vote on motions and to elect and/or become a director.

PLEASE PRINT CLEARLY IN ALL SECTIONS.

If you need more room to complete any of the sections, please include the information on a separate page.

1. PLEASE FILL OUT ALL SPACES BELOW:

Last Name:	First Name:
Address:	Home Phone:
	Other Phone (not required):
Postal Code:	E-Mail:

2. PLEASE CHECK ALL APPLICABLE BOXES:

- | | | |
|-------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------------|
| <input type="checkbox"/> New Member | <input type="checkbox"/> Single Membership before May 1st(\$15) | <input type="checkbox"/> Family* Membership before May 1st(\$30) |
| <input type="checkbox"/> Renewal | <input type="checkbox"/> Single Membership after May 1st(\$20) | <input type="checkbox"/> Family* Membership after May 1st(\$35) |
| <input type="checkbox"/> Require a Show Package | | |
| <input type="checkbox"/> Receive Newsletter by E-mail | | |

Definition of a Family: Open to husband, wife or significant other and the children of either/both parents who are still juniors. Junior is 18 years and under as of January 1st of the current year. “Wife”, “husband”, or “Significant Other” may include: those who are cohabiting, but not married by law; those who are married, but do not use the same surname; legal guardian(s).

3. PLEASE LIST BELOW ALL FAMILY MEMBERS FOR WHICH THIS APPLICATION APPLIES:

Junior: 18 years of age & under. Senior: Over 18 years of age.

Name	Jr.	Sr.	Day	Month	Year

Note: Senior members may exclude the date of birth, but it is requested that you include the day and month so it may be published in the newsletter.

4. PLEASE LIST ALL HORSES OWNED BY THE MEMBER(S) LISTED ON THIS APPLICATION:

- If more than one family member will be riding the horse/pony, please specify which one will be collecting points.
- If someone not included on this application will be showing the horse/pony, put his/her full name in the “rider” column.
- If you are riding a horse/pony that is owned by someone else, please indicate his or her name under the registered name.

Horse/Pony’s Registered Name	CBWR or MBRA Ring #	Rider

5. PAYMENT AND MAILING INFORMATION:

Please make all cheques payable to: **Cape Breton Western Riders**

Mail application form and cheque to:

Sarah Ernst
 73 Maple Hill Dr.
 Big Bras d’or, N.S.
 B1X 1Y3