

# 2010 SWVADA MEMBERSHIP APPLICATION

DATE: \_\_\_\_\_ NEW \_\_\_\_\_ RENEWAL \_\_\_\_\_

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME PHONE ( ) \_\_\_\_\_ WORK PHONE ( ) \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

**USDF NO.:** \_\_\_\_\_ (from your USDF Card) Renewing members must include this information on your application. New members will be assigned a number by USDF. USDF will mail your membership card.

IS SWVADA YOUR PRIMARY CHAPTER? YES \_\_\_\_\_ NO \_\_\_\_\_ IF NO, PLEASE NAME THE PRIMARY CHAPTER TO WHICH YOU BELONG: \_\_\_\_\_

## MEMBERSHIP TYPE:

INDIVIDUAL (SENIOR) \$47 \_\_\_\_\_

JR/YR (BIRTH DATE \_\_\_\_\_ ) \$30 \_\_\_\_\_

FAMILY: FIRST MEMBER (Above) \$47 \_\_\_\_\_

EA ADD'L MEMBER \$30 \_\_\_\_\_

NAME \_\_\_\_\_

USDF # \_\_\_\_\_

Professional \_\_\_\_\_

Amateur \_\_\_\_\_

Your newsletter is provided to you each month online at our website [www.swvada.org](http://www.swvada.org).

Please make checks payable to SWVADA and mail with your application form to:

SWVADA Membership Chairperson  
c/o Pat Nelson  
846 Mohawk Road  
Long Island, VA 24569

Office Use Only:  
10 List \_\_\_\_\_  
Label \_\_\_\_\_  
Omnibus \_\_\_\_\_

Membership is in the Southwest Chapter of the Virginia Dressage Association (VADA). Membership year is December 1 to November 30 and includes a Group Membership in the United States Dressage Federation (USDF).