

# SOUTH SHORE HORSEMEN'S COUNCIL

## 2011 MEMBERSHIP APPLICATION

Name: \_\_\_\_\_  
LAST FIRST MIDDLE INITIAL

Address: \_\_\_\_\_  
STREET OR PO BOX CITY STATE ZIP CODE

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Membership Type:	If Family Membership, list names:	If Junior, list D.O.B:
<input type="checkbox"/> Individual \$ 35	_____	____/____/____
<input type="checkbox"/> Family \$ 50	_____	____/____/____
<input type="checkbox"/> Corporate \$100	_____	____/____/____
<input type="checkbox"/> Life \$250	_____	____/____/____

I am a member of:  NEHC  MHC  MQHA  SEHA  USAE

**Riding Interests:**

**Horse Registration:** (\$10 fee per horse)  Eng  West  Saddleseat  H/J

Horse's Name: \_\_\_\_\_ Discipline: \_\_\_\_\_

Horse's Name: \_\_\_\_\_ Discipline: \_\_\_\_\_

Horse's Name: \_\_\_\_\_ Discipline: \_\_\_\_\_

**MAIL check payable to "SSHC" to:**

Jennifer Sullivan

382 Hatherly Rd

Scituate, MA 02066

781.545.8945

jenn.sullivan382@gmail.com

**OFFICE USE:** Member # \_\_\_\_\_

Rcvd: \_\_\_\_\_ Issued: \_\_\_\_\_

Method:  Entry  Cash  Check # \_\_\_\_\_