



# MEMBERSHIP APPLICATION



RETURN FORM WITH YOUR CHECK OR MONEY ORDER PAYABLE TO:  
SSHBEA, P.O. Box 1046, Shelbyville, TN 37162

**Membership is based on a calendar year,  
with dues payable  
January 1st of each year.**

## Indicate type of Membership:

**ADULT MEMBERSHIP \$60 includes:**

*(For Adults 18 & Older)*

- *The Spotted Saddle Horse* Newsletter, Email Notifications, Website
- **FREE Foal Registration**-One free registration for each paid dues period. Must be a horse registered within 6 months of birth to be eligible. No adjustments made later.
- **Voting Rights** on all matters requiring a vote of the SSHBEA Membership. In order to vote, you **MUST** be on the SSHBEA's record as the owner of at least one spotted saddle horse with current membership dues paid or within the grace period allowed by rules.
- **Reduced Rates** for registration and transfer of horses.

**FAMILY MEMBERSHIP (Includes qualifying children) \$90 includes:**

- **Same benefits as Adult Membership** plus one additional voting right provided two (2) family adults each own a registered horse or jointly own one horse.

**ASSOCIATE MEMBERSHIP \$50 includes:**

*(For Friends & Relatives, Businesses, and Others)*

**LIFE MEMBERSHIP \$600**

*(Includes Adult Membership benefits for a lifetime)*

NAME(S) \_\_\_\_\_

ROUTE and BOX \_\_\_\_\_

STREET or ROAD \_\_\_\_\_

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

PHONE (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

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

\*\*\* Adult Members, please provide a horses's name and registration number below in order to exercise Voting Rights \*\*\*

HORSE'S NAME \_\_\_\_\_ REGISTRATION# \_\_\_\_\_

SIGNATURE(S) \_\_\_\_\_ DATE \_\_\_\_\_

*For more information, go to [www.sshbea.org](http://www.sshbea.org)*