

Lewisville Saddle Club
P.O. Box 1775 * Lewisville, TX 75067

Membership Application

Family Name: _____ Home Telephone Number: _____

Address: _____ City/State/Zip: _____

e-mail address: _____

Persons included in this membership and relationship:

Name	Relationship	Date of Birth	Occupation
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Number of horses own by family: _____

Have you been a member of a similar club: Yes _____ No _____

If yes, where and when? _____ Reason for leaving _____

Character References (Other than relatives)

Name	Address	Telephone Number
1.	_____	_____
2.	_____	_____
3.	_____	_____

First month's dues of \$5.00 per family should accompany this application. Applications for new members are voted on at the quarterly meetings. When you are notified of acceptance, the monthly dues are \$5.00/month (\$60.00 annually) per family thereafter. If you are a single, adult rider, 18 years or older, annual dues are \$40.00 annually. If accepted by this organization, each person listed is expected to abide by the rules and by-laws set forth by this club.

Signature of responsible member of family _____