

2019 MEMBERSHIP & NOMINATION FORM

This form must be filled out completely & legibly. The name of the
Membership (whether family, business, or farm) must be the same as
the ownership of the horses/ponies nominated under said membership.
A membership and nomination fee for each horse, pony and/or rider must be
paid prior to showing for earned point credits to count towards ASAW Season

ASSOCIATION OF WISCONSIN		DATE:	New Membership Rene		ewa
☐ Adult Individual	i) 🔲 Busi	☐ Business Membership (\$50)			
** Academy Mem	bership (\$35) - M	ember competing for	or academy poin	ts.	
☐ Jr. Membership	(\$25) - - Member u	nder age17.			
☐ Family Members	nip (\$40) - List all	family members e	ligible for family	/ membership.	
NAME & AGE	EMAIL ADDRESS	<u>N</u>	AME & AGE	EMAIL ADDRESS	
					_
					_
** Note: The Academy Member					_
A Family Membership shall be I by the Internal Revenue Service children and young adults (Junic A Business/Farm Membership stock and those horses shown to Each membership shall identification Designated Agent to represent membership interests and obtained.	as legally entitled to r Members) age 17 hall be limited to a le inder their corporate fy one responsible t his/her family, far	o fill a joint or head-o and under (as of De egally chartered cor e business name. person (voting me	of-household inco ecember1st). poration includir mber if family, f	ome tax return). This including owners of the corporation	des on's
APPLICANT'S NAME					
FARM NAME					
ADDRESS					
CITY/STATE/ZIP					
PHONE DAYS ()		EVENIN	IGS (
E-MAIL ADDRESS					
STABLE AFFILIATION		VOTER	'S NAME		
	(If Applicable)			Note: One vote per members	hip
Member of The American Sad	dlebred Horse Ass	ociation (A.S.H.A.)	? YES NO AS	SAH Number	

Please read all information carefully and check for competition rules in your A.S.A.W. Directory and Rule book.

NOMINATION INFORMATION

EQUITATION NOMINATION (non academy riders)	\$10.00 per rider
NAME AGE	*BIRTH DATE
NAME AGE	*BIRTH DATE
NAME AGE	*BIRTH DATE
ACADEMY NOMINATION	\$10.00 per rider
Note: Family and Business Memberships must nominate Academy N	lembers below (if applicable). <u>Fee Applies</u>
NAME AGE	*BIRTH DATE
NAME AGE	*BIRTH DATE
NAME AGE Attach additional sheet if needed.	*BIRTH DATE
JUNIOR EXHIBITOR 4-H MEMBER? YES NO If Yes	
*A.S.H.A. RULE: For horse show purposes the age of an ind the show year.	
HORSE/PONY NOMINATION INFORMATION	
NAME OF HORSE/PONY ASHA Registr	ation # OWNER(S) *Age Category
1.	
2. 3.	
4.	
5. *Age Category for Country/Show Pleasure classes only: "A" 13 & under; "B" 14-17; "C" 18-38; "D" 39-49; "E" 50 & over	Attach an additional sheet if needed
TUIC CDAPE IC END NEEDE LICE NAILV	Membership Category Dues \$
THIS SPACE IS FOR OFFICE USE ONLY	Horse Nominations (\$15.00/horse) \$
RETURN THIS FORM ALONG WITH YOUR CHECK PAYABLE TO THE A.S.A.W.	Equitation Nominations (\$10.00/rider) \$
MAIL TO: American Saddlebred Association of Wisconsin	Academy Nominations (\$10.00/rider) \$
(A.S.A.W.) Michelle Wojcik W304 S1804 Brandybrook Rd. Waukesha, WI 53188 Phone: 414.915.5179 Email: info@ASAW.org	Total Enclosed \$Conta

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