

# SULLIVAN SADDLE CLUB 2012 MEMBERSHIP APPLICATION

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Email Address \_\_\_\_\_

Home Phone/Cell Phone \_\_\_\_\_

**FAMILY (\$30.00)** \_\_\_\_\_ **SINGLE (\$15.00)** \_\_\_\_\_

(A "family" is a parent or parents who live together, or grandparent or grandparents who live together, and their children or grandchildren who are 17 years of age or younger.)

<b>Adult Members</b>	<b>Age</b>	<b>Children</b>	<b>Age</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Referred By: \_\_\_\_\_

Make checks payable to Sullivan Saddle Club and send membership form and dues to:

**Kelly Onder**  
**5103 Rock Rd**  
**Bourbon, MO 65441**  
**Sullivan Saddle Club Treasurer**

All new members and membership renewals must be approved by the Sullivan Saddle and Harness Club Board Members.

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

\_\_\_\_\_  
Board Member

