

# 2008

## The Tri-State Horsemen's Association Membership Application

Name.....Date of Birth.....

Address.....

City .....State.....Zip Code.....

Phone No (.....).....Date.....

Email Address.....

**ATTENTION:** Annual 2008 membership valid January 1 to December 31, 2008  
If you are a renewing member, 2007 membership expires on December 31, 2007

**INDIVIDUAL \$25.00.....** Anyone under age 18 who is applying for Individual Membership must also list their date of birth below.

**FAMILY \$30.00.....** If applying for Family Membership, please list the names of all persons to be included in the family. This can include a spouse and children under age 18 on January 1, 2008. Any children age 18 and over as of Jan 1, 2008 must have their own adult individual membership.

Family Member's First/Last Name: \_\_\_\_\_ Date of birth is mandatory  
Date of Birth: \_\_\_\_\_

.....  
.....  
.....  
.....

Signature: \_\_\_\_\_

Please mail this form and payment to: **TSHA Membership  
Cristina Daigneault  
PO Box 59  
E. Killingly, CT 06243**

**Telephone: (860) 779-0438**  
Email: [membership@tristatehorsemen.com](mailto:membership@tristatehorsemen.com)  
Web Site: [www.tristatehorsemen.com](http://www.tristatehorsemen.com)

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