



USEA ADULT RIDER PROGRAM MEMBERSHIP APPLICATION

MEMBERSHIP VALID FROM DECEMBER 1 TO NOVEMBER 30 OF EACH YEAR

MEMBERSHIP DUES: \$25

SELECT YOUR USEA AREA: _____ **ADDITIONAL AREA:** _____

For the purposes of Awards, Qualifications and Programs. If left blank, your Area designation will default to your mailing address.

Enclosed is my check made payable to USEA (check must accompany application form) **OR**

Charge my Visa Master Card American Express

Credit Card#: _____ Exp. Date: _____

CVV: _____ Billing Zip Code: _____

Print Name on the Card: _____

USEA membership is required to compete in the Area Adult Rider Program

ALL MEMBERS RECEIVE:

- Timely information on Area Adult Rider sponsored activities
- Discounts on all Area Adult Rider sponsored activities
- Eligibility to participate in all Adult Rider Team Championships and receive ribbons at sponsored events
- Welcome notification from Area Representatives
- Email notification from Area of area activities
- Ability to participate in multiple Area programs

RIDER INFORMATION: _____ **USEA#:** _____

NAME: _____ **D.O.B:** _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

EMAIL: _____

***Will you be trying out for the Adult Team Championships:** Yes No

(Note: Current membership is required to the Adult Rider Program to participate in ALL Adult Team Championships)

I'm interested in volunteering to help in any capacity with the Adult Rider Program Yes No

For more information contact your Area Adult Rider representative.
To locate your Area Adult Rider representative visit the USEA website at www.useventing.com/about/areas

MAIL APPLICATION TO:

U.S. Eventing Association | Attn: Member Service Dept. | 525 Old Waterford Rd, NW | Leesburg, VA 20176
Phone: (703) 779-0440 (2) • Fax: (703) 779-0550 • Email: Memberservices@useventing.com