



Central Vermont Dressage Association, Inc.

Annual Membership Application Form

December 1, 2017 to November 30, 2018

Name: _____ USDF MEMBERSHIP #: _____

Address: _____

City, State, Zip: _____

Telephone: (____) _____ - _____ E-mail: _____

Family Members to be added to CVDA active membership (Junior Members: birth dates required!):

_____ Jr. Birth date ____/____/____

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Membership Benefits:



- Be a group member of the United States Dressage Federation
- Receive the CVDA "Half Halt" newsletter (emailed) and the USDF Connection (monthly)
- Pay reduced fees for classes at CVDA-sponsored shows, clinics and educational events.
- Be eligible to win Year-End Awards
- Be eligible to receive a CVDA Grant
- Vote annually for CVDA officers
- Rent DVDs and videotapes from the CVDA video library (many new DVDs!)
- Be eligible to hold office: President, Vice President, Secretary, Treasurer, Representative

Type of Membership:

Individual Membership (includes USDF membership) Number ____ @ \$60.00 = \$ _____

Junior Membership (under 18 years of age) Number ____ @ \$47.00 = \$ _____

Family Membership (Primary Member) Number ____ @ \$60.00 = \$ _____

Plus \$15.00 for each additional family member Number ____ @ \$15.00 = \$ _____

Deduct \$15 Early Bird Discount if postmarked before November 1, 2017! - \$15.00

Note: If you choose NOT to take the Early Bird Discount, the difference will be considered a donation to CVDA. No refunds will be issued.

Optional:

Newsletter Printed Copy Fee (\$25.00/year) \$ _____

Contribution to CVDA (501)(c)(3) to support the CVDA Grant and Education Programs \$ _____

Total Amount Enclosed \$ _____

Make checks payable to: Central Vermont Dressage Association, Inc. (CVDA, Inc.)

Send to: Suzie Kent

Questions? Please call Suzie at (802) 353-0587 or email her: skentvermont@aol.com