



**Central State Horse Show Association
2010 Membership Form**

****Registration Papers & Lease Agreements MUST be attached to membership form or form will not be accepted.****

Make your check payable to: **CSHSA**

Mail to: CSHSA P.O. Box 686 Eaton, OH 45320

Date: _____

type of membership:

Name: _____ Family \$35.00 Single \$25.00

Address: _____ new or renewal

Phone: _____ Email: _____

Owners and exhibitors MUST be members of CSHSA, with dues paid for the current year to be eligible for year end awards.

List of family members and dates of birth.

Please check if showing Walk/Trot 19 & older or 10 – 18 (will not lope)

Name	DOB	** Walk/Trot

Continued on back side.....

You may select a back number. The number will follow the horse. Each horse must have a separate back number.

Horse/Pony	M/S/G	Yr foaled	Breed	*Pony or Horse	Back #

***Ponies must be measured and have a 2010 CSHSA Pony Card.**

****Walk/Trot 19 & over and 10-18 MAY NOT show at a lope on any horse.**

Please declare your class for "Horse of the Year" award for each horse.

Reg. Color Breed Reg. Breed Class (ex AQHA) Pony

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Optional: During the course of the year the CSHSA occasionally puts out bids for projects (example: printing, construction, etc.) If you'd be interested in such bids please let us know your company name, skills, etc.

Signature: _____