# *Performance Standardbreds*
# *Membership Application Form*

Date:___/_____/_____
Day /Month/ Year

Last Name: _____First Name:_____

Date of Birth: _____/_____/_____
Day /Month/ Year

Permanent Address: _____

City/Town:_____Province:_____Postal Code:_____

Home Phone: (_____ )_____ Cell Phone : (_ )_____

Business Phone : (___ )_____

E-Mail: _____

A.E.F. #: _____(**REQUIRED** if participating or handling a horse with **ANY** event with Performance Standardbreds)

Fees:

| | check here | | |
|---|---|---|---|
| Full Membership | | $25.00 | Entitles member to reduced rates at educational or training events |
| ***Performance Plus*** | | $20.00 | Basic Donation Same as full member without voting privileges |
| Family membership | | $40.00 | Same as full membership. For 2 or more in same family. |

Total fees: $_____

Please make cheque payable to "Performance Standardbreds" and mail to:

Performance Standardbreds
40 Robinson Rd.
Calgary, Alberta.
T3Z 3K6

Or use the PayPal option via www.p-standardbreds.org
E-transfer to performancestandardbreds.org@gmail.com

*Thank-you for your interest and support!*