

Shelby Farms Equestrian Alliance Membership Form

Name _____

Address _____

City _____ State _____ Zip _____

Phone:

Home: _____ Work: _____ Cell: _____



Add me to the elist to receive meeting notices and other important SFEA related information via email. My email address is: _____

Yes, I would like you to share my information with other organizations at our discretion.

Areas of Interest: ___ Trails ___ Cross Country ___ Dressage ___ Show Place Arena

Other(s) (specify) _____

I am: ___ Amateur/Hobby rider ___ Equine Professional ___ Veterinarian ___ Equine Related Business

Other(s) (specify) _____

I _____ own horse(s) _____ do not own horse(s)

Other equine related organizations I belong to: _____

Membership Categories:		Dues	\$ _____
Angel.....	\$500.00	Patron.....	\$100.00
Supporter	50.00	Business/Group	35.00
Family	25.00	Individual	15.00
		Total Amt Enclosed	\$ _____
		Additional Donation	\$ _____

Shelby Farms Equestrian Alliance is a non-profit 501(c)(3) organization. Your donation may be deductible.

Mail with your check to:

Shelby Farms Equestrian Alliance
PO Box 423
Collierville, TN 38027-0423