

MASSACHUSETTS MORGAN HORSE ASSOCIATION MEMBERSHIP APPLICATION/RENEWAL

For Membership Year 1/1/2024 thru 12/31/2024
Also available on our website: www.massmorgan.com
Credit cards accepted when signing up via the web site

Mail this application with payment to: Carla Ferro, 39 Victor Street, Ludlow, MA 01056

Name				
Address				
		Dat	te of Birth	
Phone		(optional)		
Email				
Membership fee:				
Select From:				
Junior Exhibitor (17 and unde	r) \$15.00	Does not Vote		
Youth (18-21)	\$20.00	One Vote		
Individual Adult (>21)	\$25.00	One Vote		
Family**	\$35.00	Two Votes		
Partnership/Corporation	\$35.00	One Vote		
LIFE	\$300.00	One Vote		
**For family membership, the with date of birth (if junior ex		pove will be the main conf	eact. Please list all family members below	v, along
Name:		DOB:		
Name:		DOB:		
Name:		DOB:		
Check box if you would prefer pa			eck/circle all that apply:	
4H	Academy	Breeding	Carriage]
Combined Driving	Competitive Trail	Dressage	Family	

Pony Club

Other:

Therapeutic

Other:

Pleasure/Trail

Local Shows

Pet

Regional/National Shows