



Kentucky Mountain Saddle and Spotted Mountain Horse Association
 P. O. Box 1405 • Georgetown, KY 40324
 859-225-KMSH (office) • 859-252-9639 (fax) • office@kmsaha.com (email)



**KMSHA/SMHA
 2017 Riders Card Application Form**

Fee \$10.00 each

Designation: choose one Professional
 Amateur
 Novice
 Juvenile

Name: _____

Date of Birth: ____/____/____
 (month) (day) (year)

Address: _____

Phone: _____

Membership Number: _____

I fully intend to abide by the Rules and Regulations of the KMSHA/SMHA concerning my 2014 designation I have applied for with this Riders Card.

I clearly understand the definition of Rider I am applying for and will not arbitrarily change my designation under penalty of having my card revoked at any time by the Board of Directors for violation of this Rule and/or Regulation.

I may choose to change my status during the current season by writing a formal request which I will receive an answer of approval or not, and will accept the Board's decision as final.

Signed: _____ Date: _____

For Office Use Only