MEMBERSHIP APPLICATION NOVEMBER 25, 2021 – NOVEMBER 26, 2022

\*MEMBERSHIPS EXPIRE AT AGM - MEMBERSHIPS CAN BE PURCHASED UNTIL SEPTEMBER 30, 2022

*Etransfer: vegrevilleagsociety@gmail.com*

**MEMBERSHIP 2021-2022**1 a) Standard Single Membership @ $5.00 (Includes voting privileges at AGM) $\_\_\_\_\_\_\_\_\_\_\_
 b) Standard Membership Package@ $25.00 (includes: voting privileges: 1 -3day fair pass)
 (Honorary life director s receive this package at no charge) $\_\_\_\_\_\_\_\_\_\_\_
2. Couples Membership @ $45.00 (Includes standard membership with 2 voting privileges)
 (2 – 3day fair passes) $\_\_\_\_\_\_\_\_\_\_\_

3 Family Membership @ $90.00 (Includes standard membership with 2 voting privileges)
 (5 – 3day fair passes) $\_\_\_\_\_\_\_\_\_\_\_

**ARENA RIDING USERS MUST ALSO PURCHASE VAS MEMBERSHIP ABOVE
*For use of outdoor and indoor arena when booked online.***

***\*\*Due to Covid uncertainties rider memberships have been reduced from the normal rate.***

- Individual Riding User ~~REG 140.00~~ @ $100.00 $\_\_\_\_\_\_\_\_\_\_\_
- Family Riding User ~~REG 375.00~~  @ $200.00 $\_\_\_\_\_\_\_\_\_\_\_
- Riding Trainer User ~~REG 200.00~~ @ $150.00 $\_\_\_\_\_\_\_\_\_\_\_
- 4H Riding User ~~REG 85.00~~ @ $50.00 $\_\_\_\_\_\_\_\_\_\_\_

 **TOTAL ENCLOSED $\_\_\_\_\_\_\_\_\_\_\_**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s Name (if family Membership) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Children’s Name (if family Membership) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Prov: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Office Use only Payment \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_2021**