



Kaysinger Horse Show Circuit Membership and Nomination Form

Single Membership/Nomination - \$25.00
Family Membership/Nomination - \$40.00

Name: _____

Street/PO Box: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Requested Back Number for shows: _____

Children's Names and Ages as of January 1st for Family Membership:

Amount Enclosed: _____

To be eligible to receive year end awards, your membership dues must be paid. Any points you and your horse earn will not be counted until your dues are paid. You must participate in 50% of the shows this year to be eligible for yearend awards. Members are required to obtain \$50 worth of sponsorships per year.

I have read and understand the membership guidelines and I agree to these terms.

Member/Parent Signature

Member/Parent Signature

Date Paid: _____ Payment Form: _____

Return form and payment to: Deb Hensley
510 Broadway St
Grain Valley, MO 64029