

# Smoke Rise Riding Club



## Membership Application

Date: \_\_\_\_\_

Renewal \_\_\_\_\_ New Member \_\_\_\_\_

Membership Type (annual fee): Individual (\$45)\* \_\_\_\_\_ Family (\$75)\* \_\_\_\_\_

Name(s) \_\_\_\_\_

(For Family Membership, please list all names)

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Riding Experience:

Name: \_\_\_\_\_ Years Riding: \_\_\_\_\_

Name: \_\_\_\_\_ Years Riding: \_\_\_\_\_

Name: \_\_\_\_\_ Years Riding: \_\_\_\_\_

May we call you to volunteer? Yes \_\_\_\_\_ No \_\_\_\_\_

Which of the following interest you?

\_\_\_\_\_ Fund Raising / Wine Tasting Event

\_\_\_\_\_ Social Events

\_\_\_\_\_ Grounds / Maintenance

\_\_\_\_\_ Publicity

\_\_\_\_\_ Horse Show set-up/clean-up

\_\_\_\_\_ Jump painting

\_\_\_\_\_ Grand Champion / Year End Awards

\_\_\_\_\_ Call anytime to help where needed

**\*Send form with cash or check made out to "Smoke Rise Riding Club, Inc"  
to: SRRC, Atten: Dawn Fembleaux, PO Box 328, Butler, NJ 07405**