

Smoke Rise Riding Club

Membership Application



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 on you to volunteer? Yes No

Which of the following interest you?

- | | |
|---|--|
| <input type="checkbox"/> Fund Raising / Ride-A-Thon | <input type="checkbox"/> Social events / Hospitality |
| <input type="checkbox"/> Grounds / Maintenance | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Horse Show set-up / clean-up | <input type="checkbox"/> New Member Recruitment |
| <input type="checkbox"/> Grand Champion Awards | <input type="checkbox"/> Teamwear |
| <input type="checkbox"/> Jump Painting | <input type="checkbox"/> Call anytime when needed |

***Send form with cash or check made out to "Smoke Rise Riding Club, Inc." to: SRRC, Attn: Kim Christian, 33 Highlands Dr., Kinnelon, NJ 07405**