

NASMDA Membership Application



Please print out this form and mail to:

Dianna Watson, PO Box 324, Cave Springs, AR 72718

watsonhorseshows@gmail.com . 479-721-3969 or 479-644-1930

Make checks payable to:

North American Saddle Mule & Donkey Association

Family Discount: 20% for 3 or more annual memberships in the same household renewed/ordered at the same time. Applies to Membership fees only. For instance, if three individual memberships within a family unit are purchased AT THE SAME TIME, totaling \$90, you save 20% or \$18.

There is a two dollar discount for regular memberships that waive getting a printed membership card and agree to have their membership number emailed to them. Choose the appropriate option under membership type.

(Note: Cards expire on 12/31 of year of application. To renew a card, send fees by that date)

Name: _____ Number (If Renewal): _____

Farm Name (If Applicable) _____

** Extra \$10 if you want it registered/listed. (One time fee).*

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Email: _____

(\$30) **OR** (\$28) One Year Membership (\$180) 10 Year Membership (\$300) Lifetime Membership

(\$20) Youth Membership, Date of Birth: _____ Donation to Youth Scholarship Fund:\$ _____

(\$30) Versatility Trail Program (Must be Member to apply)

Additional Family Memberships:

Name: _____ Number (If Renewal): _____

(\$30) **OR** (\$28) One Year Membership (\$20) Youth Membership, Date of Birth: _____

Name: _____ Number (If Renewal): _____

(\$30) **OR** (\$28) One Year Membership (\$20) Youth Membership, Date of Birth: _____

Name: _____ Number (If Renewal): _____

(\$30) **OR** (\$28) One Year Membership (\$20) Youth Membership, Date of Birth: _____

TOTAL AMOUNT DUE: _____

Check Paypal Visa MasterCard Discover

Card Number: _____ Exp. Date: _____ CVC: _____

Name: _____ Signature: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____