



Central Florida Dressage Inc

Individual and Family Membership Form

December 1, 2018 through November 30, 2019

Central Florida Dressage Inc – Promoting the rider, trainer, and breeder

Name: _____
Mailing Address: _____
City, State, Zip: _____
Phone Number(s): _____
Email Address: _____

Date of Birth (required by USDF): Month ___ Day ___ Year ___

Membership Type: Individual/Primary \$40 _____
Family Membership \$20 _____
(Additional member of same household as primary member)
Individual Business Member \$0 _____
(Must be affiliated with a current business member)

Non-CFD Horse Registration \$5 _____
(To register the horse of a non-CFD member owned horse)

Horse Name(s): _____
Horse Breed(s): _____
Non-CFD Horse Name(s): _____
Non-CFD Horse Breed(s): _____

Are you a USDF member independent of CFD: Yes _____ No _____

What CFD events would you support either as a volunteer or participant?

____ Lesson / Ride A Test Clinics ____ Shows ____ Christmas Party
____ Day Long Seminars ____ Fundraisers ____ Annual Meet & Greet Banquet
____ Evening Speaker Meetings ____ Musical Freestyle Events ____ CFD Item Store

Member Signature: _____ Date: _____
(Parent or guardian must sign if member under age 21)

(If Applicable)
Printed Name of Parent or Guardian: _____

Relationship to minor member: _____

Name of Referring CFD Member (if referred): _____

Pay via Paypal on our website: www.centralfloridadressage.com
Or Make check payable to: Central Florida Dressage Inc
Mail form & check/Paypal receipt to: Kimberley Puthoff, PO Box 1204, Geneva, FL 32732-1204