



Mid-Michigan Open Horse Show Circuit 2013 Membership Form

Membership	Back Numbers
Individual \$20.00	Reserve \$5.00 per number (Reserves number only - We do not Print copies) ~ or ~ Laminated \$10.00 (Reserves number and you receive two copies)
Family \$30.00 Includes any family member still living at home	

Primary Name: _____ **Birth Date:** _____ **Back# Request** _____ *(Members 1-600 only)*

Address: _____ **City:** _____ **Zip:** _____

Phone: _____ **Email:** _____

Name _____ Birth Date: _____ Back# Request _____

Name _____ Birth Date: _____ Back# Request _____

Name _____ Birth Date: _____ Back# Request _____

Name _____ Birth Date: _____ Back# Request _____

Name _____ Birth Date: _____ Back# Request _____

Thank you for your interest in MMOHSC. Members are eligible for year-end awards.

Please make check payable to MMOHSC and mail to:

Gerry Hanson
13333 Lowell Road
DeWitt, MI 48820

For Office Use Only	
Date Membership Paid _____	Amount Paid _____