

Membership Enrollment Form
New Forest Pony Society of North America
Date ____/____/____

Name(s): _____

Farm Name: _____

Address: _____

Phone: _____ Fax: _____

Email: _____ Web Site: _____

Signature: _____ Date: _____

Please indicate the appropriate membership desired:

Gift __ Member pony purchased from _____

Life Member __ \$250 US

Annual Dues Individual __ \$25 US

Family / Farm __ \$45 US (up to 4 including 2 voting adults)

Child's name: _____

Child's name: _____

Note: Additional children \$5 US each (for show point eligibility)

List additional names: _____

Junior (under 18) __ \$15 US Age _____

Friend (non-owner enthusiast) __ \$15 US

Individual and adult family members 18 years or older have voting privileges.

Please indicate your equestrian interests:

Pleasure Dressage Hunter/Jumper Combined Training Driving Western

Breeding Showing Other (please indicate): _____

Please list the names and gender of your New Forest Ponies, including their prefixes:

Name: _____

Gender: Stallion Mare Gelding

Partbred: Purebred:

Name: _____

Gender: Stallion Mare Gelding

Partbred: Purebred:

Name: _____

Gender: Stallion Mare Gelding

Partbred: Purebred:



I wish to have my member information shared with other members.

I wish to receive the newsletter via (check one): email hard copy

Please make your check payable to: New Forest Pony Society of North America
Mail this form and your check to: Barbara Nelson, Stonefield Farm, 262 Blue Hollow Rd.,
Mount Airy, NC 27030