



Johnstown Saddle Club Membership Form  
PO BOX 841  
Loveland, CO 80539



Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone number: \_\_\_\_\_ Email address: \_\_\_\_\_

JSC membership runs January – December

- Family memberships include a maximum of two adults that are immediate family; over the age of 18 and their dependent children; under the age of 18
- Individual membership is for one adult over the age of 18

Individual \$35.00 \_\_\_\_\_ New member \_\_\_\_\_ Returning member \_\_\_\_\_

Family \$45.00 \_\_\_\_\_ New family \_\_\_\_\_ Returning family \_\_\_\_\_

Membership requirements for year-end awards:

- Attend at least 4 monthly meetings through the qualifying period of January-September of the current year
- Provide at least 8 volunteer hours (per competitor) at any of the Johnstown Saddle Club Events
- Compete in a minimum of 3 Gymkhana/Shows, and compete in at least 2/3 of the classes in their age group offered at the event
- Have no outstanding debt owed to the Johnstown Saddle Club
- Be a member in good standing at the time the points are earned

Competing Members Name	Birthday	Age as of January 1 <sup>st</sup>	Age group competing in



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## Tell us about the competitor (Please fill out for each competitor)

Name: \_\_\_\_\_

Favorite color \_\_\_\_\_

Favorite color for you horse \_\_\_\_\_

What is your saddle seat size? \_\_\_\_\_

What size jacket do you wear? \_\_\_\_\_

What size winter blanket does your horse wear? \_\_\_\_\_

What kind of year end awards would you like to  
see? \_\_\_\_\_

Name: \_\_\_\_\_

Favorite color \_\_\_\_\_

Favorite color for you horse \_\_\_\_\_

What is your saddle seat size? \_\_\_\_\_

What size jacket do you wear? \_\_\_\_\_

What size winter blanket does your horse wear? \_\_\_\_\_

What kind of year end awards would you like to  
see? \_\_\_\_\_

Name: \_\_\_\_\_

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Favorite color for you horse \_\_\_\_\_

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What size jacket do you wear? \_\_\_\_\_

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see? \_\_\_\_\_

Name: \_\_\_\_\_

Favorite color \_\_\_\_\_

Favorite color for you horse \_\_\_\_\_

What is your saddle seat size? \_\_\_\_\_

What size jacket do you wear? \_\_\_\_\_

What size winter blanket does your horse wear? \_\_\_\_\_

What kind of year end awards would you like to  
see? \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

*\*In signing this application, applicant declares that the individual and/or family members listed are now a current Johnstown Saddle Club member(s), and is subject to and agrees to be bound by all provisions of the Bylaws and General Rules of the Johnstown Saddle Club as they now exist or may periodically be amended.*