2010 Membership Application

Cascade West Productions

Date:_____

First Name:_____ Last Name:_____ _____

Address:_____

City:_____ State:_____ Zipcode: _____

Phone:__(_____)_____-_____ Cell:__(_____)_____-_____

Email:_____ DOB: _____/_____/_____

Horse(s):

Registered Name:_____

Registered Name:_____

Registered Name:_____

Registered Name:_____

Membership: **Open___ Youth ____ Senior ____**

New 2010 Membership: ___ $25.00

Renew Charter Membership: ___ $20.00

Charter members are members that joined the first year in 2009

Additional Horse Membership: __ $10.00

Competitor News Subscription: __ $15.00

Total Due $:_____

2010 Finals
September 10-12, 2010
Strobel's Arena
Scappoose, OR

Please Make Checks or Money Orders Payable to: CWP
Mail to: Amy Boultinghouse
215 McMormick Loop
Castle Rock, WA 98611
(360) 274-7785 or (360) 751-7785

Secretarial Use Only

Date:_____ Cash __ Check __ Money Order __ Included in sanction fee check ___