



**PANORAMA HORSE SHOW CIRCUIT**

**Membership Form**

Year: \_\_\_\_\_

**Membership Type:**

**Member**

**Information**

Single:  \$50

Family:  \$75

(of 6)

**Dues Paid:**

Yes:

No:

Cash:

Check:

Venmo/PayPal:

Credit Card:

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

Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Additional Members (Family Membership):**

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

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

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

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

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

Would you like to be added to our emailing list for info on shows, banquets, registrations?

Yes

No