

Southern Alberta Trail Riders Association

Membership Application / Renewal for the year 20_____ (effective January 1st to December 31)

Please Check:

- New Membership
- Renewal

- □ Single Membership \$25.00
- □ Family Membership \$35.00*
- □ Under 18 Single Membership \$15.00

(Parent or Guardian signature required)

*Family defined as parents and children under the age of 21 living at home.

ACTIVE MEMBER - participating in riding, events, clinics, rides, etc.

NON-ACTIVE MEMBER - Non-riding, participating in meetings & social events only.

Home Phone	Mobile Phone	Email
Address	City	Postal Code
Surname (children)	First name	active <i>or</i> non-active AEF number (if active)
Surname (children)	First name	active <i>or</i> non-active AEF number (if active
Surname (spouse)	First name	active <i>or</i> non-active AEF number (if active
Surname	First name	

EACH ACTIVE MEMBER is required to hold a CURRENT ALBERTA EQUESTRIAN FEDERATION (AEF) MEMBERSHIP.

For AEF membership information visit www.albertaequestrian.com or call 1-877-463-6233

SATRA collects personal information only to the extent necessary to create and maintain membership records, and for contacting members to notify of SATRA news and events. SATRA may use your name or likeness in newsletters, brochures or on the SATRA website, or Facebook site (this is a closed, members only site). SATRA may distribute your contact information to SATRA directors for the maintenance of the membership list. SATRA and its agents do not disclose personal information except where required by law. By signing this membership form you are deemed to consent to the collection and use of your personal information as set above. You are also confirming that your AEF membership is valid to be considered an active member.

Signature of applicants (required)	Signature of parent or guardian (<i>if required</i>)		
A signed Liability form is required for each member on this application www.satra.ca/links-docs/forms-guidelines/			
Please make your cheques payable to SATRA and mail to: SATRA c/o 123 E-Transfer address: <u>satra.members@gmail.com</u> Password: trailrider FOR OFFICE USE ONLY:	0		
Date received Cash 🗌 Cheque	e 🗌 E-Transfer 🗌		
AEF Verified \Box Liability form completed \Box Membership card sent			