



# APPLICATION FOR JUNIOR MEMBERSHIP

AMERICAN CREAM DRAFT HORSE ASSOCIATION

Kerrie Beckett, *Secretary*

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Date \_\_\_\_\_

(Please use ink)

I \_\_\_\_\_ hereby apply for Junior Membership in

the American Cream Draft Horse Association. I do subscribe and pay for one Junior Membership at \$5.00 annually.

I understand that my annual dues of \$5.00 payable by June 1 of each year following my acceptance are required to grant me all the privileges of Junior Membership.

Signed \_\_\_\_\_

(Signature)\(Printed Name)

Address \_\_\_\_\_

\_\_\_\_\_

Phone No. \_\_\_\_\_

e-mail address \_\_\_\_\_

(Anyone wishing to become a junior member of this Association **MUST** submit the signature of a member in good standing)

## ----- SPONSOR -----

I hereby signify to the best of my knowledge and belief that the named above is a Junior Member. I also state that I am a member in good standing.

\_\_\_\_\_

(Signature)\(Printed Name)

\_\_\_\_\_

(Member Number)

\_\_\_\_\_

(Sponsors Name of American Cream Draft owned)

(Reg. No.)