



ADA MEMBERSHIP FORM 2024

New Member

Renewing Member

ALL DRESSAGE ASSOCIATION

Name:	ADA #:	USDF #:
Email:	Phone:	
Address:		
City:	State:	Zip:
Registered to show in USDF? For consideration for ADA USDF award, please circle: YES NO		
Horse Name(s) and Breed(s):		Horse USDF #:

Please list horse's barn/show name (as listed on Coggins). List if OTTB for CANTER Award

MEMBERSHIP FEES* (Membership term – December 1, 2023, through November 30, 2024)

<i>*Includes USDF members benefits, such as discounted rates at USDF events and 10 issues of the award-winning USDF Connection magazine (see membership page of alldressageassociation.com for details).</i>		Date of Birth (USDF Requirement) (mm/dd/yyyy)
\$50.00	JR./YG Rider —15 and under = Jr. Rider, 16-21 (incl 21) = YG Rider (as of Dec 1 st of competition year)	(mm/dd/yyyy)
\$50.00	Adult Amateur —over 21 (age 22 and older Dec 1 st of competition year), no income from riding or training	(mm/dd/yyyy)
\$50.00	Para Dressage Rider —classifies as Para Dressage Rider	(mm/dd/yyyy)
\$50.00	Open —an adult over 21 (age 22 and older Dec 1 st of competition year), who makes income (cash or other recompense) from riding/training/teaching	(mm/dd/yyyy)
\$30.00	Non-Competing/Social —Qualifies for ADA clinics and social events. Receives USDF member benefits but does not show with ADA or USDF	
\$_____	Family —first Member Fee is \$50, each Additional Household Member is \$20. List each additional household member below providing Name, ADA #, USDF #, D.O.B and Horse.	

Add'l Family Member Name:	DOB:
Email:	Horse Name and Breed:

Office use only:

\$ Paid	Check #	Date	Postmark Date
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IMPORTANT: For points from a specific competition to be considered for year-end awards, the membership application must be submitted prior to that competition. Registration must be postmarked, or e-mailed received, a minimum of one day before the competition. Membership forms can be emailed or sent by post.

Direct questions or send registration forms to: **David Kohn, Membership Chair**
 Phone: 616-299-2926 or Email: members@alldressageassociation.com
 Mail: ADA Membership Chair, 10369 Coldwater Ave SE, Alto MI 49302

Please read and initial:

	I acknowledge that ADA show rules follow USDF guidelines. These rules as well as regulations for memberships and year-end awards can be found within the omnibus, located online at www.alldressageassociation.com . I also acknowledge that it is each individual member's responsibility to familiarize themselves with these rules.
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	I will notify the ADA of any changes in; personal data, names of registered horses to be used in the A.D.A. Shows, individual show levels and or membership status. It is my responsibility to check my posted scores and points and report all discrepancies to the ADA.
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Please mark your preference: ADA has my permission to use my / my child's photograph on the ADA website, social media pages, miscellaneous advertising, etc.

Yes	No
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Barn Affiliation/Trainer _____

Signed: _____

Date: _____