MEMBERSHIPS ARE VALID FROM THE DATE OF REGISTRATION THROUGH DECEMBER 31 OF THE SAME CALENDAR YEAR.

SELKIRK CHAPTER DUES: $5 E.WA/ID State Chapter Dues

National dues:  $40 FAMILY  $25 INDIVIDUAL  LIFETIME MEMBERSHIP  Total Enclosed $__________

Please Print Clearly

List all family members:

<table>
<thead>
<tr>
<th>Name</th>
<th>CMO #</th>
<th>Horse Stable</th>
<th>Horse (*Reg.)</th>
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<td>(*Reg.) Name</td>
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</table>

List all horse(s) that may be ridden for CMO's.

If a new horse was previously owned by a NACMO member, it keeps its NACMO number.

If you don't know that number, write the owner's name in the # space.

If the horse has never been issued a NACMO number, write "new" in the # space.

Horse Stable (nickname)

CMO#______ Breed_______ Sex____ Age____ Reg. Y N

Horse Stable (nickname)

CMO#______ Breed_______ Sex____ Age____ Reg. Y N

Horse Stable (nickname)

CMO#______ Breed_______ Sex____ Age____ Reg. Y N

Horse Stable (nickname)

CMO#______ Breed_______ Sex____ Age____ Reg. Y N

Horse Stable (nickname)

CMO#______ Breed_______ Sex____ Age____ Reg. Y N

A SEPARATE SIGNED LIABILITY WAIVER FOR EACH MEMBER MUST BE ENCLOSED WITH THIS FORM. LIABILITY WAIVERS FOR DEPENDENTS UNDER AGE 18 MUST BE SIGNED BY A PARENT OR LEGAL GUARDIAN.

BY SIGNING BELOW, I AFFIRM THAT ALL MEMBERS OF THE FAMILY (AND PARENTS OR GUARDIANS FOR THOSE UNDER 18 YEARS OF AGE) HAVE READ, AGREE TO AND SIGNED THE RELEASE, ASSUMPTION OF RISK, WAIVER AND INDEMNIFICATION IN THE DOCUMENTS ACCOMPANYING THIS FORM.

SIGNED: ___________________________  DATE: ___________________________