



2026 ASHBA MEMBERSHIP APPLICATION

(Memberships are valid from January 1 – December 31)

In order to participate at USEF Licensed Competitions, the owner, rider, driver, handler and/or trainer must be an active ASHBA competing member. To be eligible for ASHBA Awards including ASHBA High Point, Academy, and Youth, you must be an active competing member. By submitting this application, you agree to abide by all ASHBA rules and policies including the Code of Conduct.

1. MEMBERSHIP TYPE

A. ASHBA VOTING MEMBERSHIPS

Life Member \$2,500

Contributing Member \$100

Senior Member \$70

Charter Club Affiliate \$60

Name of Charter Club: _____

B. ASHBA NON-VOTING MEMBERSHIPS

Junior Member \$30
(Under 18 on December 1)

Fan Member (website access only) \$35

Legal Entity Member \$70*

Name of Legal Entity: _____

**Fee waived if the person with signature authority for the legal entity is an active ASHBA competing member.*

2. PARENTAL CONSENT

FOR JUNIOR MEMBERS ONLY:

I, Parent/Guardian confirm that the information listed on the membership application is correct and may be listed in membership directories. I understand that Member's pictures may be taken at various events. Member's image or likeness, name, horse, club, city or other information may be used in ASHBA's marketing, including the ASHBA website. I agree to this Junior Member joining ASHBA and the applicable membership rules. ASHBA may provide an online account to Member to use the ASHBA website, and I agree on Member's behalf to the website Terms of Use and Privacy Policy.

Parent/Guardian Signature _____

3. HELP ASHBA GO GREEN

Please note: Junior and Fan Memberships are not eligible to receive a Journal.

JOURNAL OF THE AMERICAN SADDLEBRED:

Yes, I want to receive a printed copy of the Journal.

*Per Internal Revenue Service guidelines, only the portion of membership dues that exceeds the fair market value of provided goods and services (\$40 Journal) is deductible as a charitable contribution. Members are encouraged to consult with their tax advisor or other qualified tax professional regarding the deductibility of their dues.

PAYMENT (Total of 1A or 1B and 6): \$ _____

Check (Payable to ASHBA) Credit Card (Amex/Visa/MC) *A 3% Convenience Fee (calculated by ASHBA) will be added to all credit/debit card payments.

Credit/Debit Card Number: _____ Exp. Date: _____ (month/year) CVC: _____

Card Holder Name (Print): _____ Card Holder Signature: _____

4. PERSONAL INFORMATION

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Date of Birth (Month/Day/Year): _____

ASHBA Member #: _____

USEF Member #: _____

Name of Signature Authority: _____

5. ADDITIONAL INFORMATION

PLEASE CHECK ALL THAT APPLY:

Professional Amateur Breeder AOT

Sport Horse Academy Farm Owner Fan

6. SUPPORT THE AMERICAN SADDLEBRED

Please consider contributing to one of ASHBA's Funds to support our primary initiatives for the betterment and enjoyment of our breed:

Annual Fund (Where Most Needed) \$ _____

Youth Programming \$ _____

Learn to Ride for Free \$ _____

Youth Scholarships \$ _____

Equine Welfare \$ _____