

**MAINE DRESSAGE SOCIETY  
HORSE REGISTRATION FORM**

2009

**Horse's Competition Name:** \_\_\_\_\_  
(You must use this name at all MDS pointed shows to ensure that scores are credited correctly)

**Owner Information:**

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

**Rider Information** (must be an MDS member at the time points are earned):

Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_  
Club Affiliation (circle one):    CMDA    EMDA    SMDA    WMDEA

**MDS Rider medal** attempting to earn this year:     Bronze     Silver     Gold     Platinum  
**MDS Rider medal(s)** previously earned:     Bronze     Silver     Gold     Platinum

**Horse Information:**

Year Foaled \_\_\_\_\_ Height \_\_\_\_\_ Color \_\_\_\_\_ Gender \_\_\_\_\_

**Awards Programs:** (check all that apply)

Aged Horse     First Year at First Level  
 School Horse Award: If so, riders' names:  
\_\_\_\_\_

**Breed Award** - If so:

Breed \_\_\_\_\_ Registration # \_\_\_\_\_  
Registered Name \_\_\_\_\_  
Please include copy of registration papers

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Payment enclosed: MAKE CHECKS PAYABLE TO MDS

\$15.00 annual or \$75.00 Lifetime \_\_\_\_\_

\$ 5.00 owner transfer fee \_\_\_\_\_

Total: \$ \_\_\_\_\_

Registration must be completed prior to first show horse attends during 2008.

Please send this form with payment and registration papers to:  
Beth Brainerd, 67 Bill Howe Rd, Norway, ME 04268  
207-743-6546 EMAIL!! hbf@megalink.net