

Please print this form, fill it out completely, and mail it and a \$45.00 check to:



## RIDER MEMBERSHIP

IEL of Orange County  
c/o Barbara Harmon  
5986 Terra Bella Lane  
Camarillo, CA 93012

Rider's Name: \_\_\_\_\_

Rider's Mailing Address:

Street \_\_\_\_\_

City, Zip \_\_\_\_\_

Phone \_\_\_\_\_

Parent's Email for newsletters: \_\_\_\_\_

Parent's Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade \_\_\_\_\_

Trainer's name : \_\_\_\_\_

In which division will you be showing ? \_\_\_\_\_

How many years have you ridden in OCIEL ? \_\_\_\_\_

Show Records Included?  yes  no

For California Dressage Society only: Are you a Member?  yes  no  
(If yes, include copy of membership card.)

Did you read the "Rules, Policies and Procedures" on the OCIEL web site? \_\_\_\_\_

Rider's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's signature: \_\_\_\_\_ Date: \_\_\_\_\_