

Mounted Archery Association of the Americas Membership Form



Please Print Legibly

Name: _____ Phone: () _____
 Address: _____ City: _____
 State/Prov: _____ Zip/Postal Code: _____ Country: _____
 E-Mail: _____ Website: _____

Please check all of the following that apply:

- I am 18 yrs of age or older ____ Yes ____ No I have a horse ____ Yes ____ No
- My name, state, and country may be posted on the MA3 website ____ Yes ____ No
- My ____ phone number/____ email address/____ website address may be shared with interested people in my area ____ Yes ____ No

Membership

Members that are under 18yrs old are not able to vote on issues concerning the association as laid out in the association By-Laws, and need the signature of a parent/legal guardian to complete this membership form. The Family Membership provides voting memberships for 2 adults and up to 3 non-voting memberships for minors living at the same address; this membership includes only 1 mailing of any MA3 information.

- _____ \$ 35.00 usd. Single Membership, annual renewal
- _____ \$ 50.00 usd Family Membership, annual renewal
- _____ \$ 500.00 usd. Lifetime Membership, no renewal needed

We are interested in learning more about our members and where your interests lie, please help us by check any of the following that strongly interest you:

- | | |
|---|--|
| ____ Clinics and training opportunities | ____ Improving my horsemanship/riding |
| ____ Competitions | ____ Serving on an association committee |
| ____ Other disciplines ie yabusame | ____ Hosting an event |
| ____ The history of mounted archery | ____ Volunteering at an event |
| ____ Other: _____ | |

By signing below, I hereby agree to abide by the rules and regulations of the Mounted Archery Association of the Americas.

Signature: _____ Date _____ 20____

Signature of 2nd Adult Member for Family Membership, OR legal guardian signature for members under 18 years old:

_____ Date _____ 20____

Names of Additional Family Members:

1) _____ 2) _____ 3) _____

Complete this form and mail with the appropriate membership fee to: **Diana Troyk**
42632 N. Chiricahua Pass
Scottsdale, AZ 85262
(414)617-3843