



Canadian Sport Horse Association
 P.O. Box 1625, Holland Landing, Ontario, L9N 1P2
 Tel: 905-830-9288 • Fax: 905-830-9635

Membership Application

PRINT CLEARLY

Name :

Address:

City Postal Code

Telephone: () Fax: ()

E-mail:

Please Check: Owner Breeder

I, or we, do hereby apply for: Membership
 (Annual, Associate, or Life)

in the CANADIAN SPORT HORSE ASSOCIATION and agree to conform to the Constitution of CSHA.

.....

Signature(s) must be in ink. Membership is to be held by person(s) whose name the horse(s) will be registered in.

Certificate of Service

Must be included with registration application.

Stallion Name

CSHA Registration # serviced the mare

on days of month year

X Print Name

Signature of the OWNER OF THE STALLION or AUTHORIZED AGENT
 which is on file at CLRC and the CSHA.

Stallion Service Report must be filed by the stallion owner, indicating the above named mare and breeding dates.