

For Office Use Only:

Date Rec'd _____

Chk # or Cash (\$) _____

Amount \$ _____

DB entered? _____

Date deposited _____

UMECRA



PERSEVERE

**UPPER MIDWEST ENDURANCE AND
COMPETITIVE RIDE ASSOCIATION
MEMBERSHIP FORM**

Membership year: _____

SELECT ONE:

RENEWAL ☐

NEW MEMBERSHIP ☐

SELECT MEMBERSHIP TYPE:

Family \$45 ☐

Single \$35 ☐

Junior \$10 ☐

SELECT MEDIA PREFERENCE:

Electronic Newsletter - \$0 ☐

Mailed Newsletter - \$10 ☐

Electronic Ride Book - \$0 ☐

Mailed Ride Book - \$10 ☐

Ride Book is available for free by downloading the PDF file at www.umecra.com on the schedule page

*Family memberships shall consist of one or more related, or coupled as significant other, adults, and/or children of such adults who are less than 18 years of age, all of whom reside in the same household. Please include all names of eligible family members below.

PLEASE PRINT CLEARLY and LEGIBLY!

Date: _____

AERC MEMBER NUMBER(s) (if applicable): _____

AERC HORSE NUMBER(s) (if applicable): _____

UMECRA MEMBERSHIP NUMBER(S): _____

Name(s): _____

Address: _____

City, State, Zip: _____

Phone number (s): _____

Email: _____

If you do NOT want your name and contact info in the membership book, check this box: ☐

Please mail completed form along with check made out to UMECRA to:

Deb Moe – Treasurer
2632 County Road G
Emerald, WI 54013