



# DERRY TRAIL RIDERS, INC. MEMBERSHIP APPLICATION

Name \_\_\_\_\_ Age if Junior \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ e-mail \_\_\_\_\_

\_\_\_\_ I WOULD LIKE TO RECEIVE MY NEWSLETTER BY E-MAIL

Occupations \_\_\_\_\_

Are you a member of \_\_\_\_\_ New Hampshire Horse & Trail Assoc (NHH&TA)  
\_\_\_\_\_ New England Horse & Trail Assoc (NEHT)  
\_\_\_\_\_ Other \_\_\_\_\_

Interests: Breed(s) \_\_\_\_\_  
Activities \_\_\_\_\_ Trail Riding \_\_\_\_\_ Horse Shows  
\_\_\_\_\_ Gymkhana \_\_\_\_\_ Other \_\_\_\_\_

Membership Types & Dues (Please make checks payable to **DERRY TRAIL RIDERS, INC**):

\_\_\_\_\_ \$15.00 FAMILY (includes children under 18 as of January 1) Fill in info below

\_\_\_\_\_ \$10.00 ADULT (18 years of age & over as of January 1)

\_\_\_\_\_ \$ 6.00 JUNIOR (under 18 years of age as of January 1)

List names to be included in family memberships - Give date of birth for junior members only.

Name	Date of Birth for juniors
_____	_____
_____	_____
_____	_____
_____	_____

I believe that I can be of help in the following activities. Please call on me !

\_\_\_\_\_  
\_\_\_\_\_

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Mail application together with dues to  
PATRICIA A. DARMOFAL, DTR TREASURER, 12 KELLY ST., HAVERHILL, MA 01832  
(978-372-1986) e-mail patdarmofal@msn.com

Make Checks Payable To **DERRY TRAIL RIDERS, INC.**

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