

# 2025 CENTRAL MEMBERSHIP FORM

**\*\*\*MEMBERSHIP DUES \$50 PER FAMILY OR \$40 SINGLE PERSON WITH 21 BEING CUTOFF AGE FOR KIDS AT HOME ON FAMILY MEMBERSHIP\*\*\***

**AGE DIVISION AS OF JANUARY 1, 2025:**

**PEEWEE – 10 & under (10 & under classes and Showmanship)**

**BUCKAROO – 13 & under (10 & under classes do not count for High Point)**

**JUNIOR – 14 – 18**

**SENIOR – 19 & over**

EXHIBITORS NAMES: \_\_\_\_\_

LAST FIRST AGE DIVISION

\_\_\_\_\_  
LAST FIRST AGE DIVISION

\_\_\_\_\_  
LAST FIRST AGE DIVISION

\_\_\_\_\_  
LAST FIRST AGE DIVISION

ADDRESS: \_\_\_\_\_

CITY & ZIP: \_\_\_\_\_

PHONE#: \_\_\_\_\_ TEXT MESSAGING: YES or NO

EMAIL: \_\_\_\_\_

The Central Arkansas Horse Show Association will not be responsible for any accidents or damages that may occur to any person, animal, or property, nor any damage to any vehicles on the show grounds. Exhibitors and/or spectators shall hold management, board members, or property owners harmless and indemnify against any legal proceedings arising from such accidents. Sending this for approval to add the membership form.

All memberships subject to board approval. If at any time a member displays unsportsmanlike conduct on site, offsite, or on social media, the board reserves the right to expel the member, regardless of point standings, at their discretion without reimbursement of dues paid.

This release must be signed by all exhibitors, or parent/legal guardian. Please list names of all minor exhibitors along with parents'/legal guardian signature.

\_\_\_\_\_  
Exhibitor / Parent / Guardian Signature /Date

\_\_\_\_\_  
Exhibitor / Parent / Guardian Signature /Date

\_\_\_\_\_  
Exhibitor / Parent / Guardian Signature /Date

\_\_\_\_\_  
Exhibitor / Parent / Guardian Signature /Date

**Mail: PO Box 72 Austin, AR 72007**

**Or pay at show. Membership must be paid prior to class for points to count.**