

VADA/Nova Membership Form
December 1, 2017-November 30, 2018

(also available on our web site: www.vadanova.org)

VADA is a USDF Group Member Organization. Members automatically become USDF Group Members



Name: _____ New _____ Renew _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____

E-mail (**Please print clearly**): _____ (see below)

USDF# if known: _____ Junior riders please give DOB (mo./day/yr.): _____

Mark here if you **DO NOT WANT** your information published in the Greenbook

Mark here if you **DO NOT WANT** to receive the VADA/Nova E-News. Please, do not let us put you on our email list and then have our emails marked as "junk" or "spam." Thank you.

Mark here if you **DO NOT WANT** emails pertaining to items that need a membership vote such as elections.

Newsletter Options (please mark one):

Paper copy _____ Prefer to read online _____

Indicate your primary VADA chapter: (You may belong to more than one chapter, but the primary chapter is responsible for sending your dues to USDF.)

NOVA ShenVADA SWVADA VADA-CH VADACC VADAF NEVADA SVDA

Additional Family Members:

Name _____ E-mail _____ DOB if Jr _____ USDF# _____

Name _____ E-mail _____ DOB if Jr _____ USDF# _____

Name _____ E-mail _____ DOB if Jr _____ USDF# _____

→ For Family Membership, please designate one person as the **Primary Family Member**

Payment Information:	QTY		Unit Price		Fee
Individual or Primary Family Member	_____	X	\$50	=	\$ _____
Additional Family Members	_____	X	\$25	=	\$ _____
Total					\$ _____

Amount paid using VADA/Nova volunteer bucks. (please enclose bucks) \$ _____

Total US dollars enclosed. \$ _____

Make checks payable to VADA/Nova Inc. and mail to: **Barbara Pickering**
VADA/Nova Membership
PO Box 354
Haymarket, VA 20168-0354

If you are a new member, how did you hear about VADA/Nova? Please check one.

Website Newsletter Partner show (which show? _____)

Other _____