



The Dressage Foundation's *Century Club Application*

Name: _____

Street Address: _____

City: _____ State _____ Zip _____

Phone number: _____

Email address: _____

Your date of birth: ____/____/____

Horse's name: _____

Do you have a preferred name for yourself and/or your horse for the publications and plaque?

Horse's date of birth: ____/____/____

(Horse attains another year of age on each January 1st, no matter when foaled)

Breed: _____

Are you a member of a Dressage Club? ___ If so, please list the Organization/s:

1) _____

2) _____

What is the anticipated date of your Century Club Ride? _____

Where do you plan to ride for your Century Club Membership (Show Name, Location)?

Show Manager's Name:

Show Manager's Email:

Do you have a primary contact person other than yourself? If so, what is his/her name and email? (Over)

The Dressage Foundation may wish to send out a press release in your area. What is the name of your local newspaper?

How did you hear about the Century Club? _____

**Please mail or email this application to: The Dressage Foundation
1314 'O' Street, Suite 305
Lincoln, NE 68508**

Email: sara@dressagefoundation.org

Questions? Call Sara Weiss, Director of Grants and Programs at (402) 434-8585