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| Office Use Only |
| Date received _____ |
| Cash _____ Check Number _____ |
| Single Membership __ Effective through _____ |
| Family Membership __ Effective _____ |

2021 Garden State Horse & Carriage Society Membership Form

Date: _____ Renewal ___ New _____

Name _____

Family Member Names _____

Address _____

Telephone Number (_____) _____ Cell Phone (_____) _____

E-mail _____

Check all that apply:

Single \$5 _____ Family (must reside at same address) \$10 _____ Lifetime \$150 _____

Receive the newsletter by mail additional \$12.00 for postage and printing _____

Member of ADS ___ CAA ___ Other driving clubs _____

Driving Interests (check all that apply) Recreational ___ Pleasure Shows ___

Clinics ___ Combined Driving ___ Other _____

Volunteer Interests (check all that apply) Pleasure Drives ___ Pleasure Shows ___

Clinics ___ Combined Driving ___ Speakers ___ Fund Raising ___ Club Store ___

Publicity ___

Please mail completed form and signed release with your check made out to
"GSH&CS" to GSH&CS P.O. Box 252 Cream Ridge, New Jersey 08514