



EDMONTON AREA ALBERTADRESSAGE ASSOCIATION

MEMBERSHIP APPLICATION / RENEWAL 2024

Please Print Clearly One form per member/family please

In 2024 we are looking to update our database: please submit a form when renewing this year.

Date Received _____
Payment Type _____
EAADA # _____

2024 Membership Fees:

Family¹ \$45 per senior and \$21 per youth²
 Adult¹ \$45
 Youth^{1,2} \$37
 Business³ \$30
 Associate³ \$25

Credit Card Fees:	
\$60 or less: \$2.00	\$151 - \$180: \$6.08
\$61-\$90: \$2.65	\$181 - \$210: \$7.01
\$91-\$120: \$3.74	\$211 - \$240: \$7.94
\$121 - \$150: \$5.15	\$241 - \$270: \$8.87

- 1) Fee includes membership to the Alberta Dressage Association (\$10.00 for Adults, \$7.00 for Youths). If you are already an ADA member through another club, reduce your membership fee appropriately. Youth is 24 or under as of January 1, 2021.
- 2) Riders between the ages of 6-25 will automatically be eligible for **The Youth Development Program's** subsidized opportunities, and their names will be shared with the Youth Development – Alberta Dressage Association unless you indicate that you do not consent below.
- 3) No ADA membership, not eligible for subsidies, awards, EAADA clinic rates or show discount. This applies to Life-Time honorary memberships also.

Name	EAADA# Or New	Youth		Sr/Yth/ Assoc/Bus	Fee
		DOB	Age Category (6-13 or 14-25)		

GST Number 876473547

Are you a member of the Alberta Equestrian Federation? YES NO

Contact Information

Donation	
Credit Card Fee	
Total	

Address _____

City _____ Province _____ Postal Code _____

Cell Phone _____ Home Phone _____

Email _____ Current Barn _____

Suggestions, comments or roving lectures and clinicians you would like to see _____

Please initial this box to indicate if you DO NOT consent to the sharing the name of youth indicated above with the Youth Development – Alberta Dressage Association

E-transfers and forms can be sent to: membership@eaada.ca

Mail Cheque (payable to EAADA) along with form to:

EAADA Membership
 11122 62 Avenue NW
 Edmonton, AB, T6h 1N2

Contact CADORA, EC and the AEF directly for memberships to these organizations.

Credit Card Information:	
Name on Card _____	
CC Number _____	Expiry Date _____ / _____
Signature _____	CVV _____
OR online at http://www.eaada.ca/Pages/join.html	
Please add Credit Card Fee as above	