



# Saskatchewan Horse Federation

## 2010 Individual Membership Application

EFFECTIVE: JANUARY 01 TO DECEMBER 31, 2010



NOTE: New membership numbers will be given in 2010 due to our new database system.

Please Print Neatly

DATE: \_\_\_\_\_

NAME: \_\_\_\_\_ SHF#: \_\_\_\_\_

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

CITY: \_\_\_\_\_ PROV. \_\_\_\_\_ POSTAL CODE: \_\_\_\_\_

RES PHONE: \_\_\_\_\_ BUS PHONE: \_\_\_\_\_

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

MALE  FEMALE Please check one of the following that is most applicable to your Aboriginal ancestry:  
 Status/Treaty  Non-Status  Métis  Inuit

Main Horse Interest Area (please check one)  Sport  Recreation  Industry Breeds

ADULT (\$48)

18 years or older  
as of 01/01/10

JUNIOR (\$30)

17 years or younger  
as of 01/01/10

DOB \_\_\_\_\_  
Year/Month/Day

(Date of birth **MUST** be filled in)

FAMILY (\$107)

up to 2 parents/guardians  
plus any number of juniors  
in the household. You **MUST**  
attach a list noting all adults  
and juniors names **AS WELL**  
**AS** date of birth for all juniors  
**Print all family names on**  
**the back.**

Horse Perils (\$20)

Optional Insurance

Heritate Nomination (\$15)

per Horse/Rider

Donation to Provincial Therapeutic  
Riding Council: **Tax Receipt Available**

### Individual Member Insurance Benefits:

- \$5 Million Liability Insurance – Includes all listed family members
- \$30,000 Accidental Death & Dismemberment
- Horse Transportation Liability Insurance - \$5,000 mortality to haul other's horses
- Sport Accident Insurance coverage at Sanctioned Events
- Members First Discounts
- \$20.00 Optional member's horse insurance for named perils – death due to fire, lightning or collision/overturn during transportation. Available only with Individual/Family Membership  
**Contact SHF for further details**
- \* Membership includes a 1 year subscription of ShowTrail and the SHF Directory per household.

### METHOD OF PAYMENT (Please cheque)

Cheque  American Express  VISA  MasterCard

Card #: \_\_\_\_\_ CSV#: (3 digits on back of credit card-MUST be provided) \_\_\_\_\_

Expiry: \_\_\_\_\_ Name on Card: \_\_\_\_\_

#### Privacy Policy

The SHF recognizes the privacy of individual with respect to their personal information and is committed to ensuring the privacy of its members. The information you provide to the SHF – such as you name, address, etc. – allows the SHF to inform you about events and activities and to notify you of issues, events or special offers, which may be of interest to you. By becoming a member or by requesting information or registering for events or courses offered by the SHF, you are giving the SHF permission to contact you by way of the information you provide. Members may choose to customize their communications preferences by contacting the SHF at [shfmedia@sasktel.net](mailto:shfmedia@sasktel.net) or 306-780-9244.

**IMPORTANT-Mailing Agreement:** I hereby give permission for the SHF to include my contact information in a list which may be used for the purposes that are not affiliated with the SHF. Cross out this entire paragraph if you do not wish to give permission. Note that by doing so you will not receive a copy of ShowTrail.

**IMPORTANT – Publicity Agreement.** I hereby give permission to the SHF to use my name or a photo of myself in conjunction with an SHF event being reported in Show Trail magazine and in articles or reports of activities used on the radio or in newspapers, magazines, the SHF website, or other media which may be utilized by the SHF for publicity or communication purposes. Cross out this entire paragraph if you do not wish to give permission.

signature \_\_\_\_\_

### TOTAL INCLUDED

Adult	\$ _____
Youth	\$ _____
Family	\$ _____
Horse Perils	\$ _____
Heritage Nomination (Name of Horse)	\$ _____
Prairie Cup Circuit (Name of Horse)	\$ _____
Enhanced Liability	\$ _____
Enhanced A.D.D.	\$ _____
Optional Travel-Health (Provide Date of Birth, <b>MUST BE UNDER 70 YRS</b> ) _____ Year/Month/Day	\$ _____
Donation for Therapeutic Riding	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

**Please mail or fax completed form, along with payment to:**

**Saskatchewan Horse Federation**

2205 Victoria Avenue • Regina, SK • S4P 0S4 • Ph: 306-780-9244 • Fax: 306-525-4009 • Online Application: [www.saskhorse.ca](http://www.saskhorse.ca)

Up to 2 Parents/Guardians plus any number of Juniors in the household. Please include all family names & the birthdates of all Juniors.

Adult	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y
Adult	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y
Junior	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y
Junior	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y
Junior	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y
Junior	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y
Junior	<input type="checkbox"/> Male <input type="checkbox"/> Female	M	D	Y

# PROTECT YOUR HORSES

## 2010 MEMBERS NAMED PERILS

**Annual premium \$20.**

**Covers all horses to a maximum of \$4000 per claim.**

**One claim per year allowed.**

**It's Optional For SHF Individual Or Family Members Owned Horses Only**

### **COVERS DEATH OF MEMBER'S OWNED HORSES RESULTING FROM:**

- Fire
- Lightning
- Collision/Overturn of a Conveyance in which the horse is being transported.

- ✓ Must be purchased at time of membership renewal.
- ✓ This policy pays up to a maximum of **\$4000** per claim, and can be applied to any of the horses owned by the Individual/Family Member.
- ✓ One Claim per year allowed.

**Annual Premium: \$20**

**Only available with the purchase of an SHF individual/family membership**

### **ALSO INCLUDES**

**Enhanced Liability:** \$20 - Good neighbour stabling of friends horse; emergency cases

**Enhanced A.D.D.:** \$25 - Added value to basic membership for accidents causing paralysis or death. Can increase total value up to a maximum of \$52,000 benefit. Includes benefits for fracture and dental.

**Optional Travel:** \$75/member or \$110 spouse & member - Covers any out of country travel for ANY purpose.

Emergency Medical coverage: \$1 million lifetime coverage; Emergency transportation - maximum of \$100,000;

Repatriation; Family Transportation. Maximum number of days for any one trip out of country is 60 days. **DATE**

**OF BIRTH MUST BE PROVIDED FOR ANYONE WHO PURCHASES. YOU MUST BE UNDER THE AGE OF 70 YEARS.**

## **Saskatchewan Horse Federation**

2205 Victoria Avenue • Regina, SK S4P 0S4 • Phone 306-780-9244 • Fax 306-525-4009

Email: shfmedia@sasktel.net • Website: www.saskhorse.ca