

MSEDA RECOGNIZED OFFICIALS' RENEWAL FORM

Please fill out the following information and be sure your contact information is correct.
This is the information that will be published in the newsletter and on the MSEDA website.

Official's Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Email: _____

I am renewing the following MSEDA Recognized Official: *check all that apply*

Dressage Only Judge _____
Eventing Judge _____
Dressage Only TD _____
Eventing TD _____
Show Jumping Judge _____

Please indicate the past year's competitions at which you served as a MSEDA Official:

A yearly fee of \$25.00 is charged per official to help offset the cost of liability insurance for officials. Please make your check out to **MSEDA**. Thank you!

Signature: _____ Date: _____

Please send the completed form to:

Julie Congleton
P.O. Box 378
Midway, KY 40347