



2022 WDASA Membership Form

WDASA Mission Statement: To actively promote Western Dressage in Southern Alberta, from Ponoka to the Southern Alberta border, East to the Saskatchewan Border and West to the BC Border.

To provide a venue for equestrian riders to access coaching, lessons, testing, and showing in Western Dressage that is open to riders of all levels, in all disciplines at an economic cost

Please Print:

Name: _____

Address: _____ City: _____

Postal Code: _____ Phone#: _____ *AEF#: _____

Email Address: _____

(WDASA Newsletters and club updates will be sent to this email address)

*Please note current AEF membership is mandatory to participate in any WDASA Event

_____ Single Membership \$25.00
(1 person over the age of 18)

_____ Family Membership \$40.00
(1 family member over the age of 18 &
additional family members under the age of 18)

Additional Family Member Names:	Age as of Jan 1, 2022:

I hereby consent to share my personal contact information, to take and use photographs &/or digital images in printed or electronic publications for promotion of Western Dressage. _____ Initials

Applicant's Signature: _____ Date: _____

Total Payment of \$_____. Paid via E-Transfer / Cheque / Cash

Email membership form to info@wdasa.ca

Please send E-Transfers also to info@wdasa.ca.

(Please include your name in the message of the E-transfer)

Contact us if you wish to pay your membership via Cheque or Cash.