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**APPLICATION FOR MEMBERSHIP**

2017 Membership Year

To become a member of Midway Saddle Club, each new applicant must:

1. Submit an application via the mail, during a regular meeting or horse show or event
2. Pay Dues at the time of application
3. Receive a copy of the By-Laws
4. Be voted on by the Membership at a future meeting

***Meetings are held the 4th Thursday of each month, at 7 pm at the Clubhouse.***

***Dues run from January to December of each calendar year.***

Application Date: / /

New Individual Membership $15.00 Renewal Individual Membership $15.00

New Family Membership $25.00 Renewal Family Membership $25.00

*Make checks payable to Midway Saddle Club*

Name: Birth date: / /

Spouse/Children’s Names & Birth dates:

Address:

City: State: Zip:

Home phone: ( ) - Work phone: ( ) -

Cell /Other: ( ) - Email:

Our Monthly Newsletter is sent to your Email Address

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**Return Form to**: Tammy Johnson, Secretary 3095 Trinity Church Road, Canton, GA 30115

***Receiving Officer to complete below:***

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Name: Date Received: / /

Amount Collected: $ Cash: Check: Check #:

**(EIN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)**

**2017 Conflict of Interest Policy Acknowledgement and Consent**

**[To be read and signed annually]**

To: All Members, Officers, Directors, Volunteers and Employees of Midway Saddle Club

I have reviewed the attached Conflict of Interest Policy for Midway Saddle Club, and advise you as follows:

1. During my term of service as a director, officer, volunteer or Member of Midway Saddle Club, I agree to disclose to the Board of Directors any personal or financial interest I may have in any matter pending before Midway Saddle Club or in any action taken or to be taken by or on behalf of Midway Saddle Club;
2. I understand that Midway Saddle Club is a non-profit corporation and is a public charity pursuant to IRC §501(c)(3) and in order to maintain its federal tax-exempt status, it must engage primarily in activities which accomplish one or more of its tax-exempt purposes; and
3. The following is a list of organizations in which I have an interest which will or may engage in transactions with Midway Saddle Club and a list of non-profit organizations of which I am a trustee, director, officer or employee.

If none, write “none.”

Organization Role

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Date Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name

Affiliation with MIDWAY SADDLE CLUB: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MIDWAY SADDLE CLUB

Conflicts of Interest Policy