

2010 Second Chance Equine Association Membership Application

Please select one membership level.

- **All Members** receive our newsletter, admission to educational seminars, invitation to training workshops, notification of fun events, access to the combined knowledge of a large network of equine professionals to help with all of your horse questions and the satisfaction of knowing you are supporting horses that desperately need your help.
- **Horse Club Members** in addition to regular membership privileges receive a **\$1000,000.00 Personal Excess Equine Liability Insurance Policy** to protect them from financial loss due to property damage or physical injury caused by their horse.

_____ **Adult Individual Membership \$10.00**

(Liability Insurance is not included with this membership)

_____ **Family Membership \$15.00 (Member, Spouse all children under 18)**

(Liability Insurance is not included with this membership)

_____ **Jr. Member (under 12 yrs) \$5.00**

(Liability Insurance is not included with this membership)

_____ **Horse Club Individual Membership \$31.00**

(Includes Individual Membership and Liability Insurance)

_____ **Horse Club Family Membership \$55.00**

(Includes Family Membership and Liability Insurance for all the horses you own)

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____

Email _____

Please Print Clearly - (Email contact saves postage and funds used to help the horses)
Make Checks Payable to SCEA. Mail to SCEA P.O. Box 534, Norvelt PA 15674-0534

Please select all areas you are willing to help the rescued horses:

- | | |
|----------------------------------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Financial Donation | <input type="checkbox"/> Emergency Trailering |
| <input type="checkbox"/> Foster Guardian | <input type="checkbox"/> Donate Hay & Feed |
| <input type="checkbox"/> Adoption of an Equine | <input type="checkbox"/> Volunteer at Fund Raising Events |
| <input type="checkbox"/> Provide Emergency Shelter | <input type="checkbox"/> Assist with Grooming & Training |
| How Many Equine _____ | <i>Comments or Suggestions:</i> |
| <input type="checkbox"/> Professional Services, Please Explain _____ | _____ |