



**International Gypsy Equine Association
Membership Application**

Please choose from Membership types below:

Individual Membership Annual (only for one person, does not include co-owner)	\$45.00
Individual Membership Lifetime (only for one person, does not include co-owner)	\$275.00
Family/Farm Membership Annual (addition of person for exhibitor show reason, \$10.00 each)	\$125.00
Family/Farm Membership Lifetime (addition of person for exhibitor show reason, \$10.00 each for annual only)	\$675.00
Youth (one time fee covers until age 18)	\$25.00
Associate Membership Annual	\$35.00

Membership Type _____ Date ____/____/____

if renewal Membership # _____

Name(s) _____

Address _____ City _____

State _____ Zip Code _____ Country _____

Email _____ Telephone _____

I hereby sign in application for membership, or membership renewal in International Gypsy Equine Association and agree to abide by the rules of the IGEA .

_____/_____/_____
Signature **Date**

If being completed as a **Youth Membership**, please list Birth Date: ____/____/____

If **Youth, Parent/Guardian Signature** required below:

_____/_____/_____
Signature Parent/Guardian **Date**

If Family/Farm Membership, please list Family/Farm Members and include birth date for any Youth Members (under age 18 years).

_____ Birth Date ____/____/____

_____ Birth Date ____/____/____

_____ Birth Date ____/____/____

_____ Birth Date ____/____/____

Completed Form and fees can be mailed to IGEA Registry Office. Checks, USPS Money Orders must be made payable to IGEA REGISTRY, or scan and email completed form to igearegistry@gmail.com and send fees via PayPal to: igearegistry@gmail.com IF YOU LIVE OUTSIDE OF United States pay with PayPal ONLY. NO REFUNDS.

www.igearegistry.com www.internationalgypsyequineassociation.com www.minigypsyhorse.com

IGEA Registry, 204 Longview Drive, Jeffersonville, IN 47130