

Southwest Spanish Mustang Association

Membership Application

Membership in the Southwest Spanish Mustang Association supports the preservation and promotion of the Colonial Spanish Mustang. Memberships are valid from January 1 through December 31 and must be renewed annually to remain current. Complete this form electronically and email it back, or print it and mail it with payment.
Return by email: ssmaregistry@gmail.com | Website: ssmaregistry.com
Mailing address: 6608 N. Western Avenue, #1068, Oklahoma City, OK 73116

Date:

MEMBERSHIP

☐

Individual Membership

\$10.00

Memberships Valid January 1 - December 31

APPLICATION TYPE

☐

New Membership

☐

Membership Renewal

MEMBER INFORMATION

First Name

Last Name

Mailing Address

City

State

Zip Code

Phone Number

Contact Email

PREFERRED METHOD OF CONTACT

☐

Email

☐

Mail

☐

Either

OPTIONAL NOTES

Use this space for any additional membership notes or questions.

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REGISTRY INFORMATION AND PREFERENCES

- ☐ I currently own SSMA-registered or SSMA-eligible horse(s).
- ☐ I do not currently own SSMA-registered or SSMA-eligible horse(s).
- ☐ I am interested in registering eligible horse(s) with SSMA.
- ☐ I would like to receive SSMA news and updates when available.

PAYMENT INFORMATION

Payment must accompany the application. Contact the Registrar if you need payment instructions before sending the application.

☐ Check or Money Order ☐ Other approved payment method Amount Enclosed/Paid:

MEMBERSHIP AGREEMENT

By signing below, I certify that the information provided on this application is true and correct to the best of my knowledge. I understand that membership in SSMA supports the preservation and promotion of the Colonial Spanish Mustang. I agree to follow the current rules, guidelines, and procedures of the Southwest Spanish Mustang Association. A typed name below may be accepted as an electronic signature when this form is completed and returned by email.

Applicant Signature / Typed Name: Date:

Printed Name: Membership Year:

FOR REGISTRAR USE ONLY

Date Received	Membership Number	Status	Payment Status	Payment Type
Notes:				

Return Instructions

Email completed form to ssmaregistry@gmail.com or mail to:
SSMA, 6608 N. Western Avenue, #1068, Oklahoma City, OK 73116
This form can be filled electronically, saved, and emailed back, or printed and completed by hand.
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