



Total Equine Vet Assoc Wellness Membership (or Renewal) Application

Member Year 2012

Horse's Name	Breed	Gender (sheath cleaning: Y/N)	Age (years); Color	Horse's Use	Level of Desired Care (Gold, Silver)	Performance Upgrade (Y/N)
<i>Example: Chewbacca(Chewy)</i>	<i>Mini</i>	<i>Gelding (Y)</i>	<i>3; Chestnut</i>	<i>Pleasure</i>	<i>Gold</i>	<i>Yes</i>

Name: _____ Payment (please circle choice): Check / Credit Card / PayPal
 Address: _____ CC #: _____
 _____ Expires: _____ 3- or 4- digit code: _____
 _____ Email: _____
 Telephone: _____ Phone registration is acceptable.

All registration forms must be accompanied by a payment. Payment due in full unless by prior arrangement.

Signature agreeing to terms: _____ Date: _____