



# YEDA Assistant Coach Registration Form 2022-2023

All completed applications will be processed in the order in which they are received.

**Please allow fifteen business days for processing.**

*Members who register by August 15<sup>th</sup> will receive a \$5 discount*

**Payment of \$50 fee must be accompanied with this form**

<b>Name:</b> _____				
<b>Team Name</b> _____				
<b>Assistant Coach Address:</b>				
_____	_____			
<small>Street Address</small>	<small>City State Zip</small>			
<b>Phone Number:</b> (    ) -    -	<b>Email:</b> _____			
<b>Emergency Contact</b>	<b>PH #:</b> _____			
<b>Please Mark all professional affiliations</b>				
<input type="checkbox"/> USEF	<input type="checkbox"/> USHJA	<input type="checkbox"/> USPC	<input type="checkbox"/> AQHA	<input type="checkbox"/> APHA
<input type="checkbox"/> CHA	<input type="checkbox"/> 4H	<input type="checkbox"/> PtHA	<input type="checkbox"/> NRHA	<input type="checkbox"/> NSBA
<input type="checkbox"/> PATH	<input type="checkbox"/> Special Olympics			
<input type="checkbox"/> Certified Therapeutic Riding Instructor	<input type="checkbox"/> Other _____			
<b>Signature</b> _____	<b>Date</b> _____			
<b><u>Make Checks out to: YEDA</u></b>		<b>For Questions Contact Debbie Arnold (CFO)</b>		
<b>Mail Form to:</b>		<b>Phone: 419 – 566 – 6589</b>		
Debbie Arnold		<b>Email: DArnold@showyeda.com</b>		
2415 State Route 603				
Ashland, OH 44805				