**YEDA Team Registration Form**

**2023-2024**

*All completed transactions will be processed*

*in the order in which they are received.*

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

**R1.03 D** Rush fee $100 will be added to the membership if a team is requesting to enter a show after the show closing date and their memberships are not currently submitted and in the database.

**Please indicate all the categories that your team will have:**

Elementary  Alumni  EWD  JR High  SR High

**Payment:**

**$125** Teams who only have Elementary, Alumni, and/or EWD Riders

**$150** Teams who have just a Junior or Senior Team. Elementary, Alumni and EWD riders are included with this registration.

**$200** Teams who have both Junior and Senior Teams. Elementary, Alumni and EWD riders are included with this registration.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Team Name** | |  | | | | | | |
| **Coach Name** | |  | | **Email** | |  | | |
| **Coach Name** | |  | | **Email** | |  | | |
| **Assistant Coach Name** | |  | | **Email** | |  | | |
| **Main Contact** | |  | | | PH: | | |  |
| **Main Address** | |  | | | | | | |
| Street Address City State Zip | | | | | | |
| **Financial Responsibility**  *In order to qualify as a YEDA Team, at least one member of the team’s Coaching Staff, School, Farm, or other named Individual must sign the below indicating financial responsibility for the team and any debts incurred.* | | | | | | | | |
| **Name** |  | | | | | | | |
| **Address** |  | | | | | | | |
|  | Street Address City State Zip | | | | | | | |
| **Phone #** |  | | | | | | | |
| **Signature** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | **Date \_\_\_\_\_\_\_\_\_\_\_\_\_** | |
| **Make Checks out to: YEDA**  **Mail Form to:**  Debbie Arnold  2415 State Route 603  Ashland, OH 44805 | | | **For Questions Contact Debbie Arnold (CFO)**  **Phone:** 419 – 566 – 6589  **Email:** DArnold@showyeda.com | | | | | |