



Last Name _	_
First Name _	
Discipline	

## Member Information Sheet

School Address: on or off campus			
Home Town Address:			
Cell Phone:	Birth date	e (Month/Year):	
E-Mail Address:			
Major:	Expected	l Year of Graduation	n:
Check One:	Sophomore	□ Junior	☐ Senior
Do you have a horse with you? I	f yes, where do y	ou board?	
Do you have a local trainer? If s	o, who?		
Are you currently riding? ☐ Yes	□ No	)	
How long have you been riding?			
If Yes, what Discipline?			
Check all in which you have an interest and	would like more	information.	
IHSA Western Riding TeamIHS	A Hunt Seat Te	amEventing	
Community ServiceProspectiv	e Student Recru	itment	

Please return completed form: Michelle Hodge in the Pickens-Salley House, or mail to 471 University Parkway, Aiken, SC 29801 or email to michelleh@usca.edu.

## Faculty/Staff Advisor for the Eventing and IHSA

Michelle Hodge (Pickens Salley House) michelleh@usca.edu \* 803.641.3408 / 334.456.2989