

**Big Sky Fox Trotter Association (BSFTA) Membership Application**  
**(Dues are \$25 per member or \$35 per family)**

Member \_\_\_\_\_ DOB: \_\_\_\_\_ Youth: Yes \_\_\_ No \_\_\_ MFTHBA # \_\_\_\_\_  
Member \_\_\_\_\_ DOB: \_\_\_\_\_ Youth: Yes \_\_\_ No \_\_\_ MFTHBA # \_\_\_\_\_  
Member \_\_\_\_\_ DOB: \_\_\_\_\_ Youth: Yes \_\_\_ No \_\_\_ MFTHBA # \_\_\_\_\_  
Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Membership directory information will not be shared outside BSFTA or affiliated chapters of the Missouri Fox Trotter Horse Breed Association (MFTHBA) without the member's permission. This information will be shared only with other members and with affiliate chapters (in order to receive their show information).

- I agree to have my address and phone number listed in the BSFTA directory.  
 I agree to have my email address listed in the BSFTA directory or  
 I agree to have my email address used by BSFTA officers, directors, and the newsletter editor only.

**Your ranch listing, published in the newsletter and on the website (bigskyfta.org), is free for BSFTA members.** Please complete the information below:

Ranch name \_\_\_\_\_  
Ranch address \_\_\_\_\_  
Ranch telephone \_\_\_\_\_ E-mail \_\_\_\_\_  
Web site address \_\_\_\_\_

**Your stallion listing, published in the newsletter and on the website (bigskyfta.org), costs \$10 per year.** It is a means of advertisement and provides support to BSFTA. To continue your listing or to add a stallion, complete and return the information below and remit \$10. Please notify us of any changes so we can update your record:

Continue as shown in newsletter: Yes \_\_\_ No \_\_\_      Add or change as shown below \_\_\_  
Stallion name and color \_\_\_\_\_  
Stallion name and color \_\_\_\_\_  
Ranch name \_\_\_\_\_ Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_  
Brief description: \_\_\_\_\_  
\_\_\_\_\_

Please take a moment to show your interests: Please check **all** that apply.  
Breeder \_\_\_ Exhibitor \_\_\_ Trail Rider \_\_\_ Trainer \_\_\_ Other \_\_\_\_\_

**Would you be willing to help with this year's show?** Yes \_\_\_ No \_\_\_ **Or sponsor a class?** Yes \_\_\_ No \_\_\_

**Please mail your check (written to BSFTA) and this form to:**  
Annette Padgett  
5150 Hill Dr.  
Florence, MT 59833

Office use only: rec'd \_\_\_ Ck# \_\_\_ \$ \_\_\_ Entered \_\_\_ E-M \_\_\_ Newsletter Ed \_\_\_ Webmaster \_\_\_