



AMERICAN MULE ASSOCIATION

REGISTRATION FORM

Long Ears Versatility Award (LEVA) & Saddle Sore Award (SSA)

Circle one or both that Apply: **LEVA** or **SSA**

Mule/Donkey Name	AMA Reg. #
Rider Name	AMA Membership #
Rider's Mailing Address	
Dollar Amount Enclosed: \$ _____	
Date: ____/____/____	

**Print this form
Complete & Mail to:**

**Casie Fairbanks
PO Box 143
Ahwanhee, California 93601** **Phone: 559-658-5277
E-Mail: 52mules@gmail.com**

Make Check payable to **AMA**

**LEVA -- \$20.00 PER YEAR
SSA -- \$20.00 PER YEAR**