



MEMBERSHIP APPLICATION

Thank you for your interest in joining the Miniature Equine Therapy Standards Association (METSA). Our mission at METSA is to promote and encourage safe practices and set standards for miniature equine-facilitated activities and therapies. We want educators, medical and therapy professionals to have peace of mind and confidence in the equine therapy teams they partner with for the equine facilitated activities. Our goal at METSA is to unite miniature therapy teams with these professionals through, education, collaboration and awareness. We are happy you have chosen to join our team and help with this endeavor.

Membership Information

- Individual membership:** \$50
(Includes qualification evaluation)
- Organization membership:** \$75
(Qualification exam \$25 per evaluation)

Payment Information Date: ___/___/___

I wish to pay by:

- Check #** _____ **MasterCard**
- Visa** **American Express** **Discover**

CC #
Pa

Expiration Date _____ CCV # _____

Name on Card _____

Signature _____

I want to further the cause amt: \$ _____

Membership amt: \$ _____

Total amt enclosed: \$ _____

Member Information

Member Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

Organization affiliated with _____

Organization Information

Organization Name _____

Mailing Address _____

City _____ State _____ Zip _____

Phone _____ E-Mail _____

- I DO NOT want to be listed in METSA's membership directory.**
- I would like to volunteer with METSA.**

Please complete & mail application to: 13906 E Montello Rd. Scottsdale, AZ 85262 or
email to metsa.int.org@gmail.com