



2018 Membership Application

Please: Only one name per application. Feel free to make copies

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 HOME PHONE _____ MOBILE PHONE _____
 E-MAIL ADDRESS _____

Please Initial) I, the above individual, grant permission to ASAAD AHA to use my name in promotional materials.

If you wish, place an "X" in front of one or more committees that you would like to help and work on

_____ Horse Shows _____ Newsletter _____ Youth
 _____ Banquet _____ High Point _____ By-Laws
 _____ Website / Social Media _____ Marketing / Promotions

YOUTH MEMBERSHIP

Youth membership is for individuals under the age of 19 as of December 1, 2017.

Make one choice per application

_____ ASAAD Youth Dues	\$10	Youth Birthdate	_____
_____ AYC + AHA Youth	\$30	Parent/Guardian Name	_____
_____ AYC + AHA + CC*	\$55	Parent/Guardian Phone #	_____
Parent/Guardian Signature _____			

*** AHA membership with a competition card is required to participate in all AHA Events.**

ASAAD + members receive a subscription of Arabian Horse Life Magazine delivered bimonthly.

ADULT MEMBERSHIP

Adult membership is for individuals over the age of 19 as of December 1, 2017.

ADULTS WHO WISH TO HOLD OFFICER POSITION MUST PURCHASE AN AHA MEMBERSHIP

ONE YEAR DUES OPTION

_____ ASAAD Association Dues	\$20
_____ ASAAD + AHA	\$70
_____ ASAAD + AHA + CC*	\$105

THREE YEAR DUES OPTION

_____ ASAAD Association Dues	\$55
_____ ASAAD + AHA	\$190
_____ ASAAD + AHA + CC*	\$295

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ALL MEMBERSHIPS EXPIRE THE FOLLOWING YEAR OR 3 YEARS ON THE LAST DAY OF THE MONTH YOU JOINED.

Please mail this form to :

Penny Gum
6580 Lakewood
Portage, In 46368

I agree to abide by the rules, regulations
and bylaws of the ASAAD AHA.

Make checks payable to:

ASAAD AHA

Signature _____

Date _____