

2019 Membership Application

Please complete and mail this form along with your check payable to KAC to:

Jill Manna, 1421 Mumma Road, Harrisburg, PA 17112

Membership Level / Annual Fee Individual / \$20.00 Youth / \$15.00		Family / \$30.00 (includes children 18 and under)		
Primary Contact Informat	ion			
First Name		Last Name		
Street Address				
City	State Zi _k	Code Phone	e #	
Email Address				
Member Information				
First Name	Last Name	ApHC #	Youth	Individual Member

First Name	Last Name	ApHC#	Youth	Individual Member

Note: Completion of this Membership Form <u>does not</u> enroll you or your horse in the KAC Point System. Point forms are available at www.kacapps.com