

Eastern ON Appaloosa Horse Club MEMBERSHIP FORM

Name: _____ ApHCC # _____
 Address: _____ Postal Code: _____
 Phone No: _____ Fax No. _____
 E-Mail : _____

If paying for a family membership, please list your spouse and all children 18 & Under & their birth dates:

_____/_____/_____ _____/_____/_____
 _____/_____/_____ _____/_____/_____

I hereby agree to abide by the Constitution, By-Laws and Rules of the Eastern Ontario Appaloosa Horse Club Inc.

Date: _____

Signature: _____

Signature of Parent or Guardian if Youth: _____

Dues: Single	\$15.00	\$ 15.00 Total
Family	\$25.00	\$ 25.00 Total
Youth	\$10.00	\$ 10.00 Total

Optional Sponsorship Form

Name of Sponsor: _____ Amount Paid \$_____ Cash () or Cheque ()

Class to be sponsored: _____
 1st Choice _____
 2nd Choice _____

**Send to: Jesse Newman Road, Indian River Line, Indian River, Ontario ,
K0L 2B0**

or jnewman626@hotmail.com

