



The Arabian & Half Arabian Club of Oregon

P.O. Box 1071
Wilsonville, OR 97070

MEMBERSHIP APPLICATION

Member's Name _____ Jr. Date of Birth _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____ SSN: _____

My main area of interest with my horse is: _____

I would be interested in helping on the following committees:

_____ Annual Show	_____ Youth	_____ Trail Rides	_____ High Point
_____ Club Goals	_____ Region IV	_____ Futurities	_____ Nominations
_____ Newsletter	_____ Annual Meeting	_____ Clinics	_____ Membership
_____ Education	_____ Promotion	_____ Other	

JUNIOR, SENIOR and SECOND FAMILY MEMBER dues include IAHA Membership. Associate dues do not. Please make check payable to AHACO.

SENIOR \$60 SECOND FAMILY MEMBER (Senior). \$52
JUNIOR \$37 ASSOCIATE MEMBER \$20

Projects or specific goals I would like to see the club work toward:
