

ARKANSAS PAINT HORSE CLUB
Membership Information Form
2014

Fees: \$20.00/First Member, \$5.00/Each Additional Member Same Household

First Member Information (\$20.00)

Member 1: _____
APHA ID#: _____
Address: _____

Phone: _____ **Cell Phone:** _____
E Mail: _____

Additional Member Information (\$5.00)

Member 2: _____
APHA Youth/Amateur ID# and Date of Birth: _____
Phone: _____ **Cell Phone:** _____
E Mail: _____

Additional Member Information (\$5.00)

Member 3: _____
APHA Youth/Amateur ID# and Date of Birth: _____
Phone: _____ **Cell Phone:** _____
E Mail: _____

Additional Member Information (\$5.00)

Member 4: _____
APHA Youth/Amateur ID# and Date of Birth: _____
Phone: _____ **Cell Phone:** _____
E Mail: _____

Additional Member Information (\$5.00)

Member 5: _____
APHA Youth/Amateur ID# and Date of Birth: _____
Phone: _____ **Cell Phone:** _____
E Mail: _____

Please mail completed form and check to:

Karen Kennedy
7316 Rye Hill Road East
Fort Smith, AR 72916