



Western Michigan Appaloosa Regional

Application for Membership - Membership Year: **2018**

(January 1st - December 31st)

Make check payable to: **WMAR**
 Mail to: Tami Vickery, Treasurer
 3200 Eric Drive, White Lake, MI 48383

| | |
|-----------------------------|--|
| Husband & Wife - \$ 20.00 | |
| Adult (each) - \$ 13.00 | |
| Youth (each) - \$ 7.00 | |
| Family - \$ 30.00 | |
| Family Lifetime - \$ 150.00 | |
| Single Lifetime - \$ 100.00 | |

****Checks returned for Non Sufficient Funds will incur a \$ 45 charge****

Visit our website for updated information: www.WMARAPP.org also on Facebook Total:

***** PLEASE Write a seperate check for your membership. Do NOT add it onto any other invoices, fees, dues or show expenses *****

Farm Name: _____

Street Address: _____

City: _____ State/Prov: _____ Zip: _____

Home Phone: _____ Work Phone: _____

CELL Phone: _____ Fax: _____

E-Mail: _____ Country: _____

HUSBAND & WIFE SECTION

****Must have ApHC membership #'s if you are a Nat'l Member****

| N / R | Last Name | First Name | Initial | Non Pro? | ApHC Nat'l Member # |
|-------|-----------|------------|---------|----------|---------------------|
| | | | | | |
| | | | | | |

(N/R=New/Renewal Membership)

ADULT SECTION

****Must have ApHC membership #'s if you are a Nat'l Member****

| N / R | Last Name | First Name | Initial | Non Pro? | ApHC Nat'l Member # |
|-------|-----------|------------|---------|----------|---------------------|
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(N/R=New/Renewal Membership)

YOUTH SECTION

****Must have ApHC Membership# if Nat'l Member****

(Birthdate REQUIRED for Youth Members)

| N / R | Last Name | First Name | Initial | BirthDate | ApHC Nat'l Member # |
|-------|-----------|------------|---------|-----------|---------------------|
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(N/R=New/Renewal Membership)

Office Use Only

Check #: _____ Amount: _____ Date Rec'd: _____ Cards Sent: _____

Notes: