

SPACECOAST ARABIAN HORSE CLUB, INC.
An Affiliate Club of Arabian Horse Association, Aurora, CO

2008 MEMBERSHIP APPLICATION

New _____ Renewal _____ AHA # _____ Birthdate _____

Name _____ E-mail Address _____

Address _____ Home Phone _____

City, State, Zip _____ Cell Phone _____

____ AHA/SPACECOAST One Year Adult - \$40 (\$25 for AHA/\$15 for Spacecoast)
 1 Adult Individual AHA/Spacecoast voting membership.

Includes a subscription to "ARABIAN HORSE MAGAZINE"

____ AHA/SPACECOAST One Year Youth - \$30 (\$20 for AHA/\$10 for Spacecoast)
 1 Youth Individual AHA/Spacecoast non-voting membership.

Includes a subscription to "ARABIAN HORSE MAGAZINE"

____ AHA Competition Card - \$20 - Required for members who compete at recognized AHA
 events or award programs. Includes a \$1,000,000 Personal Equine Liability Insurance Benefit.

____ AHA Late Fee - \$10 - Applied if membership is renewed after the last day
 of the month in which it expires

____ SPACECOAST INDIVIDUAL ASSOCIATE - One Year Adult - \$15

____ SPACECOAST YOUTH - One Year Youth - \$10 (Under 18 as of 12/01/05)

____ SPACECOAST FAMILY - One Year Family - \$20 (Includes all children under 18)

____ Half-Price Subscription to HORSE & PONY (Twice Monthly) - \$10

As a member of AHA, you agree to be bound by all the provisions of the Articles of Incorporation,
 By-Laws, Rules and Regulations of the Arabian Horse Association, as they may exist or may from
 time to time be amended, knowledge of which you now have or will immediately acquire.
 (Parent or guardian must sign for Junior member)

SIGNATURE _____

Make check payable to SPACECOAST ARABIAN HORSE CLUB, INC. and send with SIGNED application
 to -

EDNA H. OWENS 3900 LAKEMONT RD. MELBOURNE, FL 32934-7722 321-254-1280

MEMBER SUPPORT FORM

____ I am interested in becoming an officer or board member.

____ I am interested in helping with youth programs and activities.

____ I am interested in helping at club-sponsored horse shows and events.

____ I don't have special interests but would like to be included on the club's volunteer list to help in any way I am needed.

____ I can't help in any particular way but I would like to show my support to our club by making the following donation to help offset expenses. Enclosed is my check made payable to Spacecoast Arabian Horse Club for \$_____. Note: If you would like to designate where your money will go, please indicate on your check.

ADDITIONAL MEMBERSHIP INFO

Spouse _____ Birthdate (mm/dd) _____

Child _____ Birthdate (mm/dd/yy) _____

Child _____ Birthdate (mm/dd/yy) _____

Child _____ Birthdate (mm/dd/yy) _____

Are you a member of any other clubs (local or breed)? _____

Which ones? _____

Do you show? _____ What level? _____

Horse Name _____ Breed _____

Age _____ Gender _____ Registration # _____

Horse Name _____ Breed _____

Age _____ Gender _____ Registration # _____

Horse Name _____ Breed _____

Age _____ Gender _____ Registration # _____

Horse Name _____ Breed _____

Age _____ Gender _____ Registration # _____

Riding disciplines _____

Non-riding activities _____

Non-horsey interests _____

Other interesting facts about your family _____