

MICHIGAN APPALOOSA HORSE ASSOCIATION

Application for Membership - Membership Year _____

(January 1st – December 31st)



Make check payable to: MAPHA
Mail to: Judy Biber, MAPHA Treasurer
 28328 Dixboro Rd., South Lyon, MI 48178

Checks returned for Non Sufficient Funds
 will incur a \$25.00 charge

Husband & Wife - \$20.00	_____
Single Adult - \$15.00	_____
Youth (each) - \$5.00	_____
Horse nominations (each) - \$5.00	_____
Equine Times - \$8.50	_____
TOTAL \$	_____

Office Use

HOUSEHOLD ADDRESS:

Street Address: _____ Phone (_____) _____ - _____
 City: _____ State/Prov.: _____ Zip _____ Country _____
 E-Mail Address: _____ Add to On-Line Community List? _____

Husband & Wife Section (Please indicate N for New Member or R for Renewal in the first column)

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

Single Adult Section

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

Youth Section

N/R	Last Name	First Name	Initial	BIRTHDATE	MApYA Mem #	ApYC Nat'l Mem #

HORSE NOMINATIONS – Points for MAPHA Year End Awards do not begin to accumulate until

- 1.) The Horse nomination is paid/received by the MAPHA for the show year and
- 2.) Both the owner and exhibitor are current MAPHA members

* Enter the following information **exactly** as it appears on the ApHC Registration papers *

Horse Reg. Name: _____	ApHC Reg.#: _____	Sex: _____	Year Foaled: _____
Owner(s) Name: _____		ApHC Mem.#: _____	
_____		ApHC Mem.#: _____	

Horse Reg. Name: _____	ApHC Reg.#: _____	Sex: _____	Year Foaled: _____
Owner(s) Name: _____		ApHC Mem.#: _____	
_____		ApHC Mem.#: _____	

(Return BOTH copies with your payment)

Please send a Horse Nomination form for additional horses