



MINIATURE HORSE ASSOCIATION OF ARIZONA
MEMBERSHIP APPLICATION FORM

_____ YEAR

<u>Annual Fee</u>	<u>January – December</u>
Single Applicant	\$ 25.00
Family	\$ 30.00
Youth (use Youth Forms)	\$ 5.00
Lifetime Membership	\$250.00 per person

Circle One: _____ **New Member** or **Renewal** or **Lifetime Member**
Amount \$ _____ **for year 20** _____ Paid by: Cash _____ Check _____ Chk# _____

Primary Applicant:

First Name: _____ Last Name: _____

Secondary Applicant:

First Name: _____ Last Name: _____

Children's Names: _____

Address: _____ **City:** _____ **St.** _____ **Zip** _____

Phone: _____ - _____ - _____ **E-mail Address:** _____

Ranch Name: _____ **Web URL:** _____

I/We approve any of the above information to be printed in the association public web site and member list.

*(Please initial) Yes: _____ No: _____

How many Miniatures do you now own? _____

List any other organizations or registries of which you are a member:

Please Indicate Your Interests Below:

Breeding	Promotion of Show and Events
Charity/Therapy Work	Recreational Driving
Parades	Showing
Pets	Volunteer or Officer

Primary Applicant's Signature

Secondary Applicant's Signature

Mail Application and Dues to:
MHAA c/o Joan Solheim
1140 E. Roberts Road Phoenix, AZ 85022

***Make check payable to MHAA**

OFFICIAL USE ONLY: _____

Date Received: _____ Date Treasurer Received: _____