



THE AMERICAN MINIATURE HORSE ASSOCIATION, INC.

5601 S Interstate 35 W • Alvarado, Texas 76009

(817) 783-5600 • FAX (817) 783-6403

http://www.amha.org

MEMBERSHIP APPLICATION

Please check the appropriate Membership, complete the information below, and return.

Applicants agree to abide by all the Rules, Regulations and decisions of the AMHA, its Officers and Directors or its appointees.

Table with 4 columns: Membership Type, USA, CANADA, INTERNATIONAL. Rows include Annual Membership, 3rd Member or Subsequent in household, Youth Membership, Associate Membership, 3 Year Membership, and 3rd Member or Subsequent in household.

* Annual Membership doesn't expire until one year from the month payment is received.

** Must reside at same address as Member.

*** Valid until youth age limit is exceeded as defined in the AMHA Rulebook (Article IV-Section 2-D)

****Non-AMHA Horse Owners Only

NOTE: MEMBERSHIP INCLUDES SPOUSE ONLY IF REQUESTED.

Please Print:

For Show Purposes please include sex and birth date (Sex and birth date required for Youth)

Primary Member Name [Sex checkboxes] Birth Date MM/DD/YY

Spouse Name [Sex checkboxes] Birth Date MM/DD/YY

3rd Member or Subsequent at same address [Sex checkboxes] Birth Date MM/DD/YY

Youth Name [Sex checkboxes] Birth Date MM/DD/YY

Youth Name [Sex checkboxes] Birth Date MM/DD/YY

Private [checkbox] Check to have AMHA not publish your address (this is independent of Public Phone)

Address City / State /Zip/Country

Public Phone Daytime Phone - AMHA use only E-mail Address

PLEASE MAKE ALL PAYMENTS IN US FUNDS Credit Card Check Enclosed

Credit Card #: Expiration Date: CVV:

Name on Card: Signature: