



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 - \$ **25.00** _____
 Adult (each) - \$ **15.00** _____
 Youth (each) - \$ 7.00 _____
 Family - \$ **35.00** _____
 Family Lifetime - \$ 150.00 _____
 Single Lifetime - \$ 100.00 _____

Total: _____

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

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

Farm Name: _____
 Street Address: _____
 City: _____ State/Prov: _____ Zip: _____
 Home Phone: _____
 CELL Phone: _____
 E-Mail: _____

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

Work Phone: _____
 Fax: _____
 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 #

(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 #

(N/R=New/Renewal Membership)

Office Use Only

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