Wisconsin Desert Horse Association

An Affiliate Club of the Arabian Horse Association

(Please note your application cannot be processed without complete information)

For Office Use:

Name (A)_____ **Date:**_____

Name (B)_____ **Phone (H)**_____

Farm Name_____ **Phone (C)**_____

Address_____

City_____ **State**_____ **Zip**_____

Email_____

Membership Type **New**_____ **Renewal**_____

Adult, Family, and Youth memberships include AHA Memberships. Contact the WDHA Membership Chair for information about AHA Life Membership. Please allow up to two weeks for WDHA membership processing which is sent on to AHA.

Types of Memberships

Level 1 – Adult includes AHA and WDHA voting privileges. Youth (18 years and under)

_____**YOUTH- $20** **Date of Birth**_____ **Current AHA Number**_____

_____**ADULT-$50** **Current AHA Number**_____

Level 2- Includes *Competition Card. AHA/WDHA voting privileges for Adult. Youth (18 years and under)

_____**YOUTH- $45** **Date of Birth**_____ **Current AHA Number**_____

_____**ADULT- $85** **Current AHA Number**_____

_____**FAMILY-$160** **(18 years and older) Includes AHA/WDHA voting privileges and Competion Cards**

(A)Current AHA Number_____ **(B)Current AHA Number**_____

Date of Birth_____ **Date of Birth**_____

Associate Memberships

Required for Club privleges including High Point, Futurites, Maturities, ect. Youth (18 years and under). Family Includes one Adult and one Youth membership or two Adult memberships.

_____**YOUTH- $10** **Date of Birth**_____ □ **Please Check for High Point Participation**

_____**ADULT-$25** □ **Please Check for High Point Participation**

_____**FAMILY-$40** **(A)Date of Birth**_____ □ **Please Check for High Point Participation**

(B)Date of Birth_____ □ **Please Check for High Point Participation**

Dues of $40 or $75 per adult voting member and $20 or $45 per youth member will be forwarded to the Arabian Horse Association (AHA). AHA entitlements are described on the AHA website at www.arabianhorses.org

***Required to compete at AHA recognized shows and participate in AHA Acheievement Award programs**

Make Checks Payable to WDHA and Mail to:

Gail Rentmeester
5254 H.E. Townline Road
Green Bay, WI 54311
920-536-0447

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