2016 MSQHA Membership and Nomination Form

General Membership: New F	Renewal Do you want	to receive the Newsl	etter <u>via email</u> ? Y	_ N
I do not wish to have my name	published in the Membership	Directory. If space	is not checked, name	will be published.
Name:				
Farm/Business Name:				
Address:				
City:				
Phone: Cel	ll Phone:	Email:		
Adults: Circle the division/s in which	h you qualify to ride (Open is a	ssumed): Amate	eur Select	Novice
Name:	AQHA Reg. No	DOB	Owner/Rider:	Div
Name:	AQHA Reg. No	DOB	Owner/Rider:	Div
Youths: Circle the division/s in which	ch you qualify to ride (Open is	assumed):		
Youth 14-18	Youth 13 & Under Nov	ice Youth Walk	-Trot Leadline	
Name:	AQHYA No	DOB	Youth Assoc	Div
Name:	AQHYA No	DOB	Youth Assoc	Div
Name:	AQHYA No	DOB	Youth Assoc	Div
Horses:				
Name:	AQHA No	Age	Owner	
List All Exhibitors for this horse:				
Name:	AQHA No	Age	Owner	
List All Exhibitors for this horse:				
*YOUTH NEED TO HAVE PAID M THEIR HORSE/YTH FOR YEAR F REGISTER THEIR HORSE. YOU' *THE ADULT SPECIAL OWNER/I RU	<mark>END AWARDS</mark> . ADULTS NE TH ARE NOT ELIGIBLE FO	ED TO JOIN THE (R THE PERPETUA AL AND MUST PAY	GENERAL MEMBE AL OWNER/RIDER A Y FEE FOR AWARD	RSHIP & AWARD!
General Membership Fee (Individua	l (\$30), Family (\$40), Farn	n (\$40), Lifetime	(\$200)) = \$	_
*Owner/Rider Fee X \$15 = \$_ Perpetual Award	Horse Non	nination Fee	X \$30 = \$. FEES = \$	

Make checks payable to MSQHA and mail to: Linda McArthur 8427 Old Frederick Road Ellicott City, MD 21043 Call 410-627-6566 if you have any questions