

TENNESSEE WALKING HORSE BREEDERS & EXHIBITORS ASSOCIATION OF WASHINGTON

2016 MEMBERSHIP APPLICATION

FAMILY MEMBERSHIP \$25

Family membership covers two adults and their children under age 18 who reside at a single residence.

Family membership shall entitle two members to voting privileges. Names of voting member shall be submitted to the Association with the membership application.

Family members under age 18 are not eligible to serve on the Board of Directors.

INDIVIDUAL/YOUTH MEMBERSHIP \$20

Individual members shall be at least 18 years old, as of December 1, and shall have one vote at all membership meetings. Individual members are eligible to serve on the Board of Directors.

Youth members shall be age 17 or younger and not included in a family membership. Youth members shall have voting privileges but are not eligible to serve on the Board of Directors, except in a Youth position.

WASHINGTON STATE HORSEMEN \$22

Individual/100% Club membership shall be paid through the Association.

PLEASE COMPLETE FOR ALL MEMBERS, WHETHER VOTING OR NOT. Attached additional sheets, if space is needed.

Name: \_\_\_\_\_

Circle one: MR. MRS. MS. DR.

Address: \_\_\_\_\_ City State Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ \*Email: \_\_\_\_\_

Date of Birth (Youth only) \_\_\_\_\_

I am an: \_\_\_OWNER \_\_\_BREEDER \_\_\_TRAINER \_\_\_EXHIBITOR \_\_\_OTHER (vendor, friend, etc.)

Name: \_\_\_\_\_

Circle one: MR. MRS. MS. DR.

Address: \_\_\_\_\_ City State Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ \*Email: \_\_\_\_\_

Date of Birth (Youth only) \_\_\_\_\_

I am an: \_\_\_OWNER \_\_\_BREEDER \_\_\_TRAINER \_\_\_EXHIBITOR \_\_\_OTHER (vendor, friend, etc.)

Name: \_\_\_\_\_

Circle one: MR. MRS. MS. DR.

Address: \_\_\_\_\_ City State Zip \_\_\_\_\_

Telephone: \_\_\_\_\_ \*Email: \_\_\_\_\_

Date of Birth (Youth only) \_\_\_\_\_

I am an: \_\_\_OWNER \_\_\_BREEDER \_\_\_TRAINER \_\_\_EXHIBITOR \_\_\_OTHER (vendor, friend, etc.)

\*Newsletters, show packets, event invites and other communications will be emailed, unless you request otherwise.

The TWHBEA of WA is organized for all Walking Horse enthusiasts, regardless of their special interests, and it takes all members working together to have a successful club. Member involvement is essential! Please check below how you would like to participate.

- Trail Rides, Horse Shows, Bylaws, Social Events, High Points, Board of Directors, Other: \_\_\_\_\_

Make checks payable to: TWHBEA of WA
Mail completed applications to: Karen Lanpher, Secretary
522 Chapman Rd, Camano Island WA 98282-8465

Payment Received \$ \_\_\_\_\_
Paid by Check # \_\_\_\_\_/Credit Card \_\_\_\_\_
Date Received \_\_\_\_\_
Membership # \_\_\_\_\_