

Mother Lode Arabian Horse Association

Missi Throne, Membership Chairman
P.O. Box 7158, Auburn, CA 95604-7158

Associate Membership Application

Name _____ AHA# _____ Member since _____

Mailing Address _____

Street

City

State

Zip

Phone _____ e-mail _____

Youth Name _____ Birth date _____

Type of Membership

Anyone with a prior years membership is considered a renewal. Circle the appropriate category and amount.

Renewal

New

Associate Family Membership
(No Vote)

\$25.00

\$25.00

Associate Adult Membership
(No Vote)

\$20.00

\$20.00

Associate Youth Membership
(No Vote)

\$10.00

\$10.00

Total Enclosed \$ _____

A family membership is for married couples who reside at the same address and their unmarried children under 18 at the same address. These children do not have an AHA Youth Membership.

This application is to be submitted with you initial dues. The by-laws of this Association, and membership in MLAHA becomes effective upon approval by the Board of Directors. Your dues contributions to MLAHA are not deductible as charitable contributions. Please consult with your tax advisor to determine provisions relating to the deductibility of business expenses.

The undersigned hereby agrees to be bound by and comply with the Articles of incorporation and By-laws of the Mother Lode Arabian Horse Association.

Signature _____ Date _____

Return this form and your check to:

MLAHA

Attn: Missi Throne

P.O. Box 7158

Auburn, CA 95604-7158

(916) 987-6749