

## 2007 Southwest Washington Pinto Horse Club Membership Application

Owner Information						
Last Name:		First:		MI:		
email			Cell Phone:			
Street Address:			Home Phone:			
City:		State:		Zip Code:		
Exhibitor Information						
(If this is a family membership, please list all family members. Attach additional pages as necessary)						
Exhibitor Name(s):		Age:	DOB	Division: (circle one)		Horses(s) to be shown:
				Youth	Amateur	Open
				Youth	Amateur	Open
				Youth	Amateur	Open
				Youth	Amateur	Open
Type of Membership:		Check One:				
Individual (any age)			\$15.00			
Family (2 adults + kids < 18)			\$25.00			
To be eligible for year end awards, you MUST attend ONE SWWPtHC sponsored show. All PtHA shows will count toward year end awards.						
Horse Information						
(Please list all eligible horses: Attach additional pages as necessary)						
Horses Name:	Type: (ST/HT/SA/PT)	Gender: (M/G/S)	Class: (Horse/Pony/Mini)	Color: (Ovr/Tob/BS)	Exhibitor:	
<p>Please make checks payable to <b>Southwest Washington Pinto Horse Club</b> or <b>SWWPtHC</b>. You may email this form to <a href="mailto:kkingossett@aol.com">kkingossett@aol.com</a> or mail this form and payment to: SWWPtHC, PO Box 177 La Center, WA 98629</p> <p>Membership will be effective upon date of receipt. You will be emailed a conformation. By signing this form, you agree that you have read the general rules and understand that it is your responsibility to complete the requirements set forth by Southwest Washington Pinto Horse Club.</p>						
Signature:			Date:			
Receipt Information						
Data Received:	Received By:		Amount:	Check # or Cash		