



NORTHERN MICHIGAN ASSOCIATION  
OF WESTERN HORSE CLUBS

2010 MEMBERSHIP APPLICATION

Membership term begins January 1 and ends December 31.

Benefits of Membership:

- Social and Volunteer Opportunities
- Educational Opportunities
- Competitive Opportunities and Experience
- Bi-Monthly Newsletter
- Membership Directory

Membership Type:

- Individual Youth (18 Years & Under) \$20
- Individual Adult (19 Years & Over) \$25
- Family (2 adults & children of one or both adults) \$35
- I request that my NMAWHC Newsletter be mailed to me. \$5

I understand that I will be charged \$5.00 extra in my membership dues to cover the costs of production and mailing

Membership Information:

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Email: \_\_\_\_\_  
 City: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Zipcode: \_\_\_\_\_

Family Membership Information (please list each family member):

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

Circle one:

Would you like to have your name published in the membership directory? Yes No

Please return 2009 Membership Application along with payment to:

**Don Kessel, NMAWHC Treasurer**  
**4187 Broomhead**  
**Williamsburg, MI 49690**

Membership questions can be directed to Don at 231-267-5409.

<b>OFFICE USE</b>	
DATE _____	TIME _____
CHECK# _____	CASH _____
AMOUNT _____	
SHOW/EVENT _____	