



MEMBERSHIP APPLICATION FOR 2019

NAME _____ AHA# _____

FARM NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE # _____ EMAIL _____

If you are a current member of AHA, please return the AHA renewal notice you received, along with your payment, directly to AHA.

Be sure to specify ODAHA as your Affiliate Club. Renewals, and New memberships, can be done on the AHA website, www.arabianhorses.org, for all categories.

Competing memberships include ODAHA dues, AHA dues, and AHA competition card. Fees are per member except family memberships.

_____ **JUNIOR (17 & under): \$50 Date of Birth (required):** _____

_____ **ADULT: \$100**

_____ **3 YEAR ADULT: \$280 (Best deal! Save \$20!!)**

_____ **FAMILY: \$195 includes 2 voting adult memberships.**

Non-competing membership includes ODAHA and AHA dues.

_____ **ADULT: \$65**

Local, non-competing membership includes ODAHA dues only.

_____ **JUNIOR (17 & under): \$12 ODAHA dues. Date of Birth:** _____

_____ **ADULT: \$25 ODAHA dues only.**

Additional Members:

NAME _____ DOB _____ AHA# _____

NAME _____ DOB _____ AHA# _____

NAME _____ DOB _____ AHA# _____

I/We agree to abide by the rules of regulations of the Old Dominion Arabian Horse Association.

SIGNATURE _____

Payment of dues must accompany this form. Payment constitutes agreement to abide by the rules and regulations of the Old Dominion Arabian Horse Association. Make checks payable to **Old Dominion Arabian Horse Association**. Mail payment to: **BILL JENKINS**, 10320 Graves Rd., S. Chesterfield, VA 23803, Phone: (804) 691-2154.