

Please complete this form and submit it with a check payable to WWHA for **\$25 Individual/Family** or for **\$10 Youth** (age 17 or under on January 1st, 2010) to apply for or renew your membership for 2010.

Send completed form/check to Mary Jo Leveque, N6501 Cty. Rd. H, Elkhorn, WI 53121

Wisconsin Walking Horse Association
2010 Membership Application/Renewal Form

Applicant Information:

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

e-mail: _____

Spouse: Name: _____

Children: Youth Members are required to indicate date of birth to qualify for show points/awards.)

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Equine Ownership: I/We own _____ Tennessee Walking Horse(s) and _____ other horses.

The horse(s) are mainly used for _____

WWHA Areas of Interest: _____

Type of Membership: _____ New Membership _____ Renewal of 2009 Membership

_____ Individual/Family (\$25) (Indicate total number of people on membership: _____)

_____ Youth Only (\$10) (age 17 or under on January 1st, 2010) (Date of Birth: _____)

How did you learn about us? _____ Friend/Member _____ Midwest Horse Fair _____ Website

Other: _____

Signature: _____ Date: _____

Questions / Ideas / Suggestions / Comments:

FREE MEMBERSHIP REQUEST

Completed application form to be submitted to WWHA Membership Chairperson by Seller.
All Membership Applications subject to approval of WWHA Board of Directors.

DATE OF SALE OF REGISTERED TENNESSEE WALKING HORSE: _____

NAME OF SELLER (CURRENT WWHA MEMBER) _____

SIGNATURE OF SELLER (CURRENT WWHA MEMBER) _____