

Membership Application

January 1 – December 31, 2010
(calendar year)



Name (as on AQHA card) _____

Address _____ City _____ State _____ Zip _____

Choose One:

Single Membership (\$30)

Family Membership (\$40)

Family Membership includes 2 adults and all children in same household

Choose One:

New Membership

Renewal

For Family Memberships:

Name of 2nd adult (as on AQHA card) _____

Child #1 (as on AQHA card) _____ DOB _____

Child #2 (as on AQHA card) _____ DOB _____

Child #3 (as on AQHA card) _____ DOB _____



Checks can be made payable to MCRA or Midwest Cow Horse and Reining Association

Send this completed form and payment to:

Holli Clark
W306 N6950 Bette Ann Drive
Hartland, WI 53029