



**MONTANA APPALOOSA HORSE CLUB  
MEMBERSHIP APPLICATION**

NAME: \_\_\_\_\_ ApHC # \_\_\_\_\_

NAME: \_\_\_\_\_

YOUTH: \_\_\_\_\_  
DOB \_\_\_\_\_ AYA# \_\_\_\_\_

YOUTH: \_\_\_\_\_  
DOB \_\_\_\_\_ AYA# \_\_\_\_\_

YOUTH: \_\_\_\_\_  
DOB \_\_\_\_\_ AYA# \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

**TYPES OF MEMBERSHIP**

FAMILY: includes children 18 & under \$25.00 \_\_\_\_\_  
SINGLE YOUTH 14-18: without family membership 15.00 \_\_\_\_\_  
INDIVIDUAL ADULT OVER 18 20.00 \_\_\_\_\_

DATE: \_\_\_\_\_ TOTAL AMOUNT ENCLOSED: \$ \_\_\_\_\_

**MAKE CHECK PAYABLE TO: MT ApHC**

**MAIL TO: MONTANA APPALOOSA HORSE CLUB**

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