

## 2024 Membership Application

**Definition of Memberships: INDIVIDUAL** (one person any Age)/ **FAMILY** (no more 2 person 18yr and older living together as a couple plus any dependents age 18yr & younger living in the same household listed below)

Membership: (circle one please)

Individu	ıal 10.00	Family 20.00	
Prima	ary Member	Information	
Name:	DOB		
Address:			
City: State:	Zip_		
Phone Email_			
T-Shirt Size Hood	ie Size	Ja	cket Size
Horse blanket Size Horse Boot Size (If you ride more tha		t sizes in order o	f prefer sizes)
Westark Horse Show Assocation, Inc., its a sponsored by the association will not be redamage to, theft of or loss of proper In signing below you agree to the terms of the above which can be found on the WHSA website or provided their parent and/or legal guardian	sponsible for in erty occurring to disclaimer and to by the Secretary.	hjury to and or d before, during, o abide by the WHSA As an adult signing for	eath of a person or animal, or for rafter any WHSA event. bylaws, rules and regulations. A copy of or any children listed, you state that you are
PAID BY: CASH: \$OR CHECK	AMOUN	Γ: \$	Recvd By:
Member signature	Date		
Parent/Guardian Signature	Date	WHSA Treasurer: _	Date

## **Additional Family Information**

Name:	Relationship	DOB		
T-shirt Size	Jacket Size	Hoodie Size		
Horse Blanket Size	Horse Boot Size	Jacket Size Hoodie Size Horse Boot Size		
Name:	Relationship	DOB		
T-shirt Size	Jacket Size	Hoodie Size		
Horse Blanket Size	Relationship Jacket Size Horse Boot Size			
Name:	Relationship	DOB		
T-shirt Size	Jacket Size  Horse Boot Size	Hoodie Size		
Horse Blanket Size	Horse Boot Size			
Name:	Relationship	DOB		
T-shirt Size	Jacket Size	Hoodie Size		
Horse Blanket Size	Relationship DOB  Jacket Size Hoodie Size  Horse Boot Size			
Name:	Relationship	DOB		
T-shirt Size	Jacket Size	Hoodie Size		
Horse Blanket Size	Horse Boot Size			
Name:	Relationship	DOB		
T-shirt Size	Jacket Size	Hoodie Size		
Horse Blanket Size	Horse Boot Size			