



ARABIAN HORSE ASSOCIATION, INC. OF MAINE

Application for Membership

New Member _____ Renewal _____ Membership Year _____

ASSOCIATE MEMBERSHIP

(Belonging to AHAME Only)

1. **Individual Associate Membership** \$25
2. **Family Associate Membership** \$40
(includes children under 18)
3. **Junior Associate Membership** \$17
(under 18)

FULL MEMBERSHIP

(Voting rights in IAHA, Region 16 and AHAME)

4. **Full Individual Membership** \$55
5. **Full Family Membership** \$105
6. **Full Junior Membership** (under 18) \$30

Please Note: Due to IAHA rules, full members **MUST** submit the date when you first became a member of IAHA in order to renew your Full Membership. Date: _____

If you are submitting a Junior Membership, please check here _____

Name _____ Date of Birth (required) _____

Address _____

City, State, Zip Code _____

Social Security # _____ Telephone _____

Please send this Application for Membership, along with your check made out to AHAME, to:

Laurie Emery, 222 River Road, Madison, ME 04950