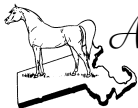


Membership Application



Arabian Horse Association

of MASSACHUSETTS

www.massarab.org

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Email _____ Phone _____

Membership Fees:

___ \$15 Junior

___ \$40 Jr w/IAHA

___ \$20 Individual

___ \$80 Ind. w/IAHA

___ \$30 Family (No IAHA)

___ \$10 IAHA Late Fee after Dec. 15th

___ \$10 per horse Year End Awards

___/___/___ Date of birth (Jr.)

_____-_____-_____ Soc. Security# Adult

_____ Junior Name(s)

_____ Horse Name(s)

Make checks payable to: A.H.A.M. Mail to: 5A Farm Street, Blackstone, MA 01504

Memberships include a subscription to the Equine Journal