



Arizona Horse Council

Membership Application Associations & Clubs

Annual Membership: \$65.00 Three Years: \$175.00

NAME OF CLUB/ASSOCIATION _____

ADDRESS/ CITY/STATE/ZIP _____

EMAIL ADDRESS _____

WEBSITE ADDRESS (if applicable) _____

PHONE NUMBER FOR CONTACT PERSON _____

The current officers of our organization are:

TITLE	NAME	ADDRESS	EMAIL ADDRESS
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Our regular meeting time, date, and place is:

Our total number of current adult membership is: (Please attach a current roster of members) _____
(This information is being requested to attest to our legislative strength. It will be kept in the strictest confidence and only used as necessary to fulfill our mission “to preserve promote and protect the Arizona equestrian lifestyle”). For additional details see ASHA Privacy Policy 2008.
Our association/club objectives & interests are as follows: _____

**THE ARIZONA HORSE Council needs Volunteers.
If you have members in your organization who would like to help us
preserve Equestrians Rights, please provide the names and contact
information below:**

We also need a representative from all clubs and associations in Arizona

Name:

Email:

Phone Number:

Cell Number:

**AZ Horse Council
P.O. Box 1283
Maricopa, AZ 85139**

**Payments accepted online at:
www.arizonahorsecouncil.org
Or
Mail to address above**