IDAHO PAINT HORSE CLUB

2025 Membership Application

Membership Name			APHA #		
Membership Name should	be the same as the	APHA recorded own	er of horse(s)		
Farm/Ranch or name (if dif	ferent from above)				
Address		City			
State		Zip			
Telephone		Work			
Email Address					
Children's names and ages	including last name	if different from abo	ove:		
Child	Age	Child		Age	
Child	Age	Child		Age	
Child	Age	Child		Age	
Type of Membership:			Cost:	Selection:	
Firm, Corporation, or Institution of Learning			\$30		
Firm, Corporation, or institution of Learning Family (includes father, mother, and family youth 18 & under)			\$30		
Family (includes father, mother, and family youth 18 & under) Single Adult 19 years of age and over			\$20		
Youth 18 years and under outside of family membership			\$20		
Enclosed is my check #		_in the amount of \$ _			

Both the owner AND exhibitor must be members of IPHC to qualify for show high points or yearend awards. Everyone has the right to work and show in an environment free from harassment or bullying where they feel safe. The stresses placed on targets of bullying have far reaching effects on the emotional health and well-being of the victims and on the organization in which it occurs. Bullying can be physical, verbal, written, psychological, or cyber. Incitement of others to such acts is also bullying. IPHC EXPRESSLY PROHIBITS THE BULLYING OF ANY PERSON BY ANY MEANS AT ANY IPHC/APHA FUNCTION.

Make checks payable to IPHC and return to:

Patricia Schuster 1784 W Bayeux Drive Meridian, ID 83642