		With Convenience Fee
SELECT TYPE OF 2023 MEMBERSHIP:	<ul> <li>□ Individual</li> <li>□ Family (includes spouses, children under 17)</li> <li>□ Junior Exhibitor (17 and under)</li> <li>□ Farm (Owner must be member to compete)</li> <li>□ Horse Shows</li> <li>□ Lifetime</li> </ul>	\$50 \$52 \$75 \$78 \$25 \$26
IS THIS A:		
LIST YOUR EXISTING MEMBERSHIP NUMBER, IF YOU HAVE ONE:		
LIST NAMES OF MEMBERS OR FARM OWNER (AND AGES FOR JUNIOR EXHIBITORS):		. Age
ADDRESS:	Street	
	City State	ZIP
	Email	
	Cell phone	
DO YOU PREFER	☐ Emailed membership card ☐ Printed mer	mbership card
AFFILIATED STABLE NAME:		
	Membership expires on Nov. 30 of each year. If paying via credit card or PayPal, please include the convenience fee with your payment.	
PAYMENT AMOUNT ENCLOSED:	\$	



**SEND THIS FORM AND PAYMENT TO:** ARHPA, Inc.

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