



# NORTHWEST ARKANSAS HORSE SHOW ASSOCIATION

## 2025 Membership Application

**PLEASE fill out completely & PRINT CLEARLY!**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Business/Cell Phone: \_\_\_\_\_

### Family Membership Information

(A family shall mean married persons or grandparents and any unmarried children living in the same household.)

Names	Age (as of Jan 1, 2025)	Date of Birth (18 or under)

**Single Membership \$30 / Family Membership \$50    Total Enclosed \_\_\_\_\_ Ck/Cash \_\_\_\_\_**

**Make Check to: NWAHSA**

**Payment rec'd by \_\_\_\_\_**

### Acknowledgement:

- ☒ The Northwest Arkansas Horse Show Association, nor its members are responsible for any accident, injury, theft or loss of any type before, during or after any events.
- ☒ I understand the guidelines for state show qualification and year-end awards and will abide by the show rules that are outlined in the NWAHSA By-Laws.
- ☒ I give NWAHSA permission to take photos of myself and/or dependents to use for promotional or advertising such as Facebook and website.

Signature \_\_\_\_\_ Date \_\_\_\_\_