

WYOMING QUARTER HORSE ASSOCIATION

2020

MEMBERSHIP APPLICATION

NAME _____ SPOUSE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

TELEPHONE _____ E-MAIL ADDRESS _____

PREFERRED METHOD OF CONTACT _____ MAIL _____ EMAIL _____ PHONE _____

DIVISION SHOWING:

AMATEUR NAME(S) _____ Amateur OR Select

_____ Amateur OR Select

YOUTH NAME(S) _____ Age _____

_____ Age _____

_____ Age _____

NOTE: OWNER & EXHIBITOR MUST BOTH BE MEMBERS FOR POINTS TO COUNT.

FAMILY MEMBERSHIP (as defined by AQHA) \$ 40.00

Family members may earn points in open, amateur and youth divisions.

MAIL TO: WQHA

Kristin Lyons,

3736 Road 214

Cheyenne WY 82009