

PIEDMONT PASO FINO HORSE ASSOCIATION

www.piedmontpfha.org

MEMBERSHIP APPLICATION

Membership for year October 1, _____ to September 30, ____ (Dues paid between July 1^{st} and Sept. 30^{th} will apply to the following year)

We are 100% volunteer non-profit organization. Would you be willing to volunteer? If yes, is there a specific			
area of interest?			
☐ Individual* (Annual) \$20 ☐ I☐ ☐ Social \$10 — Social Membership	• •	I Membership - One (1) adult entitled to	o one (1) vote
*First time Paso Fino owner? You		Individual membership	
Name:	Ema	ail Address:	
Mailing Address:	Pho	ne Number:	
☐ Family \$30 — Family Membership	o - Up to two (2) adults and any childre	n under the age of eighteen (18) living in	n the same household, entitled to two (2) votes
Name:	Ema	nil Address:	
Spouse/Other:	Pho	Phone Number:	
Children under 18 years of age:			
Mailing Address:			
☐ Farm \$40 - An individual or family three (3) votes for the designated agent. membership is active.	·	· · · · · · · · · · · · · · · · · · ·	adult agent. Farm memberships are entitled to tpfha.org. Links remain active as long as your
Farm Name:	Phone Number:		
Agent:	Spouse:		
Children under 18 years of age:			
Mailing Address:			
Email Address:	Website:		
All types of Memberships: Do you belong to PFHA?	PFHA Membership #	Designated PFHA Re	egion?

Make Checks payable to: Piedmont PFHA
Mail form with enclosed dues to: Julie Aldred

2775 Burke Smokey Creek Rd.

Lenoir, NC 28645