

OMIQHA 2017 Membership Application

New Membership_____ **Renew Membership**_____ **Changes to Membership**_____

*Youth \$15 _____ *Adult \$20 _____ *Life Time Adult Membership \$130.00_____

*Family \$35_____ (Includes husband and/or wife and their children 18 yrs. & under)

Amount Enclosed \$_____ Referred by:_____

Name_____

Spouse_____

Children & Birthdates: _____

Street Address:_____

City: _____ State:_____ Zip:_____

Home Ph# _____ Cell Ph# (if desired) _____

County you reside in_____

Email: (Addresses are only used to forward membership information and Private Website Access, and are not sold. We will occasionally forward emails from our sponsors to our members but will not provide them directly to the sponsors)

Name/ Address:_____

Name/ Address:_____

Name/ Address:_____

Please make Checks payable to **OMIQHA** and:

Send to:

or

Bring Form to an OMIQHA Meeting

Madison Hallas

1681 Diebler Road

Bucyrus, OH 44820

hallasmshowhorses@yahoo.com

845-323-9176

*Please Note- Both the Exhibitor AND the Horse Owner MUST be active Members of OMIQHA at the time of showing at an Approved show to accumulate Year End Award Points.