



St. Clair County Arabian Horse Association

2018 Application for Membership

Date Joined _____ Member Number _____ Renewal: Yes _____ No _____
Name _____ Phone # _____
Address _____
City _____ State _____ Zip Code _____
Farm Name _____
Email _____

Name of Family Members	Age		Birth date	Rider	
	1/1/18	Student		Yes	No

Family Memberships consist of parent or guardian with all minor children and includes those children up through ages 24 currently in higher education. If not in higher education, children 18 years and older should have their own membership.

I assume full responsibility for accident and/or injury to myself, my family, or my horse(s) while participating in the S.C.C.A.H.A

Signature of Adult Member _____ Date _____

Membership Fee: \$20 per Family or Early bird membership of \$15 per Family by March 31st.
Make Checks payable to S.C.C.A.H.A.

Mail completed Forms to: Lisa Remy
830 Virginia Ave.
Marysville, MI 48040