



St. Clair County Arabian Horse Association

2019 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	Student	Birth date	Rider	
	1/1/19			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 June 30th.

Make Checks payable to S.C.C.A.H.A.

Mail completed Forms to:

Lisa Remy
830 Virginia Ave.
Marysville, MI 48040