



# Illinois Appaloosa ASSOC.

## Membership Application

**Name:** \_\_\_\_\_

**Spouse's  
Name:** \_\_\_\_\_

**ApHC Membership No.** Yours: \_\_\_\_\_ Spouse's: \_\_\_\_\_

**Children's Names (under 18):**

1. _____	<b>AYA No.</b> _____
2. _____	<b>AYA No.</b> _____
3. _____	<b>AYA No.</b> _____
4. _____	<b>AYA No.</b> _____

If more space is needed please continue on back.

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Do you want your newsletter by:** (Please Check One)

**Email** \_\_\_\_\_ **or by Hard Copy** (Regular Mail) \_\_\_\_\_

**Membership Fee:** (Please Check One)

_____ <b>\$30 Family</b>	_____ <b>\$25 Individual</b>	_____ <b>\$15 Youth</b>
(Includes spouse & children 18 & under)		(if not included in a Family Membership)

**Send check made out to Illinois Appaloosa Association along with this**

**form to:** Robbin Nickelson, 6111 Byron St., Salisbury, IL. 62677 (217) 415-3655

WARNING: Under the Equine Activity Liability Act, each participant who engages in an equine activity expressly assumes the risks of engaging in and legal responsibility for injury, loss, or damage to person or property resulting from the risk of equine activities.