

Ohio Horseman's Council, Inc.

Membership Application For Year 20__

(Membership is from January 1 to December 31)

() New () Renewal

Member Since _____

Please print clearly or type

Name: _____ Age: _____ Phone: _____

Spouse: _____ Age: _____ E-Mail: _____

Address: _____

City: _____ State: _____ Zip: _____

I want to Join:

Primary Chapter _____

At Large

The Corral and State Quarterly are included in your membership fee.

I do not want to receive the Corral. I do not want to receive the State Quarterly.

Note: Some OHC chapters charge an additional fee to cover costs of chapter newsletters, etc. You may be notified of same by that chapter.

OHC Basic Membership (Without Equine Excess Liability Insurance)				OHC Plus Membership (With Equine Excess Liability Insurance)				
Type	Membership Fee	Chapter Charge	Total	Type	Membership Fee	Chapter Charge	Insurance	Total
Single	\$15.00	\$	\$15.00	Single	\$15.00	\$	\$19.00	\$34.00
Family	\$25.00	\$	\$25.00	Family	\$25.00	\$	\$38.00	\$63.00
Sen. Cit.*	\$15.00/ea.	\$	\$15.00/ \$30.00	Senior Cit.*	\$15.00/ \$30.00	\$	\$19.00/ea	\$34.00/ \$68.00
Student**	\$15.00	\$	\$15.00					
* Age 62+ as of January 1				*Age 62+ as of January 1				
**Under Age 18 as of January 1								

Associate Membership

No. of Members	Membership Fee	Association President/Chairperson:
	\$30.00	Address (If different from above):

If family membership, list names and ages of children **under 18** (this is needed for insurance purposes).

1. _____ 2. _____ 3. _____ 4. _____ 5. _____
 Name Age Name Age Name Age Name Age

Your application cannot be accepted without your signature. If family membership, both spouses/partners must sign; if individual membership, applicant must sign; if Senior Citizen, each applicant must sign; if student membership, parent or guardian must sign for applicant. Also date this document.

SIGNATURE (applicant): _____ Date: _____

SIGNATURE (spouse/partner): _____ Date: _____

Make checks payable to: Ohio Horseman's Council, Inc.

Mail To: Sheila Craft, State Treasurer
7356 Twp. Rd. 119
Fredericktown, OH 43019

Membership Card Issued By: _____ Date: _____

www.ohiohorsekanscouncil.com

