

Northern Ohio Quarter Horse Association
Membership Application

Calendar Year 2018

Name _____

SS #: _____

Address _____

Phone #: (____) _____

City, State, Zip Code _____

Cell # (____) _____

Email (required-membership info. will be emailed) _____

YOUTH: \$15.00 _____ Date of Birth: _____ AQHYA #: _____ Novice _____

ADULT: \$25.00 _____ Amateur #: _____ or AQHA#: _____ Novice _____

FAMILY: \$40.00 _____ (Indicate Members Below)

Husband: _____ AQHA #: _____ Wife: _____ AQHA #: _____

Youth: _____ Date of Birth: _____ AQHYA #: _____ Novice _____

Youth: _____ Date of Birth: _____ AQHYA #: _____ Novice _____

Youth: _____ Date of Birth: _____ AQHYA #: _____ Novice _____

Life Memberships: Adult \$150.00 _____ Youth \$50.00 _____

Return to: Candi Fites
17590 Courtney Road
Beloit, OH 44609

Make checks payable to: NOQHA
