



2012 Membership Form

Name _____

Address _____

City _____

Postal Code _____ Phone Number _____

Email Address _____

Type of Membership Youth \$20 Single \$20 Family \$30

*One day membership \$5 (does not qualify for year end awards.
Valid only on date purchased.)*

Names of Family Members _____
(if a family membership) _____

Purchase Rule Book (\$12) \$ _____ ***Sponsor the WHAO*** \$ _____

Payment Total \$ _____ Cheque Cash

I hereby apply for membership with the Western Horse Association of Ontario (WHAO). I and/or my representatives or family agree to be bound by the rules and constitution of the association. I further agree to assume full responsibility for my safety and that of my children, horses and property while at any WHAO approved show.

APPLICANTS SIGNATURE: _____ DATE: _____

PARENT OR GUARDIAN'S SIGNATURE: _____
IF UNDER 19 YEARS OF AGE

**Please send completed application with payment to: Aleasha Nimec 275 Guyatt Rd, Binbrook, On L0R 1C0
Cheques made payable to WHAO**