



Western New York Quarter Horse Club, Inc.

2022 Membership Application

Date _____
 Parent/Adult's Name: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Telephone: _____ Cell Number: _____
 Email Address (please write legibly): _____

New Membership Renewal

Type of Membership

**Must be 18 yrs or over for Individual Membership

Individual (one vote) \$30.00 Family (two votes) \$35.00
 Cash Check # _____

NOTE: Please indicate the names of additional family members under 18 years of age to be included in the Family Membership. **For your child to be eligible for Youth Club Membership, the youth's family must pay a Family Membership.** Names of Youth Club members must be listed below with their birthdate. Please indicate if Youth would like membership in the Youth Club.

Youth Name or other Family Members to be Included in Membership	Youth Birthdate	Include in Youth Club? (Yes/No)

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NOTE: For 2022 there is a separate form for the nomination of points keeping fees.

Please remit this form and payment in US funds (payable to WNYQHCI) to:
 Karen Randall
 4456 Ridge Road
 Lockport, NY 14094
 Please email randallkaren254@gmail.com with any questions.