



Western New York Quarter Horse Club, Inc.

2023 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

****To receive meeting credit for attendance at Banquet, membership dues must be paid AT or BEFORE the January Banquet.

New Membership Renewal

Type of Membership

**Must be 18 yrs or over for Individual Membership

___ Individual (one vote) Annual \$40.00

___ Family (two votes) \$45.00 plus \$5.00 for each child enrolled in the youth club

#of children enrolled in youth club _____ x \$5.00 = _____

Cash Check # _____

NOTE: Please indicate the names of additional family members under 18 years of age to be included in the Family Membership, along with their AQHYA ID Number. **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 and AQHYA ID number. Please indicate if Youth would like membership in the Youth Club.

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

SELECT EXHIBITORS: You must declare how you want your WNYQHCI points to accumulate for the 2023 show season in the event that Amateur and Select classes are combined. _____ Select _____ Amateur

**If you would like to be considered for the Harold K. Frey Sr. Memorial Perpetual Trophy, please select (1) of your divisions that you would like the following points to be counted; Working Hunter, Equitation O/F, Hunter Hack, Working Hunter Under Saddle. Circle Division to be used: AQHA Open Amateur Select Amateur
Youth Novice Amateur Novice Youth Rookie Amateur Rookie Youth

Please send 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.