

**Appaloosa Horse Club of Canada**

P.O. Box 364 Norwood, Ontario, Canada, K0L 2V0

705-872-8555

[appaloosa@nexicom.net](mailto:appaloosa@nexicom.net)

**20\_\_\_\_\_ MEMBERSHIP APPLICATION / RENEWAL**

Renewal for # \_\_\_\_\_ or New Applicant \_\_\_\_\_

Corporation: \_\_\_\_\_ Telephone: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email: \_\_\_\_\_ Cell: \_\_\_\_\_

	fees subject to change
_____ Adult / Corporation Membership	\$45.00
_____ Youth Membership	\$20.00
_____ Family Pack	\$65.00

I agree to abide by the Constitution, Bylaws, Rules & Regulations of the Appaloosa Horse Club of Canada. The submission of this signed document or application is deemed to be the consent to use your Personal Information pursuant to the ApHCC Privacy Statement.

Authorized Signature x \_\_\_\_\_

If you are a member of more than one ApHCC affiliate, record on this form which affiliate your membership is to be counted with for ApHCC voting purposes.

ettransfer \_\_\_\_\_ cheque \_\_\_\_\_ MasterCard \_\_\_\_\_ or Visa \_\_\_\_\_ accepted (4% surcharge on credit card payments)

Credit card # \_\_\_\_\_ expiry date \_\_\_\_\_ CVV # \_\_\_\_\_ Cardholder Signature x \_\_\_\_\_

Send to: P.O. Box 364 Norwood, Ontario, Canada, K0L 2V0 705-872-8555 [appaloosa@nexicom.net](mailto:appaloosa@nexicom.net)

**\_\_\_\_\_ RENEWAL or \_\_\_\_\_ NEW AMATEUR PROGRAM ENROLLMENT**

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

\_\_\_\_\_ Amateur Status \_\_\_\_\_ Novice Amateur Status Signature x \_\_\_\_\_

Applicants must be 19 years of age or older as of January 1<sup>st</sup> of the current year and must be an ApHCC member in good standing of the current year. All applicants must meet the requirements of ApHCC Show & Contest Rules for Amateurs (Rules #768 to #777). Those applying for Novice Amateur status must meet the requirements of ApHCC Show & Contest Rules for Amateur and for Novice Amateurs (Rules #778 to #781). Novice status is applied for in an honour basis. The submission of this signed document or application is deemed to be the consent to use your Personal Information pursuant to the ApHCC Privacy Statement.

**Amateur Enrollment Fee:**

\$ \_\_\_\_\_ \$10.00 Canadian

\$ \_\_\_\_\_ **ApHCC Membership Fee**

\$ \_\_\_\_\_ Total

**New applicants enrolling for the first time into the Amateur or Novice Amateur Program must have the bottom portion of the enrollment form completed by two current ApHCC members.**

To the best of my knowledge, the above applicant meets all of the requirements to participate in the ApHCC Amateur Program.

Name: \_\_\_\_\_ Membership # \_\_\_\_\_ Signature \_\_\_\_\_  
(please print) ApHCC member not related to applicant

Name: \_\_\_\_\_ Membership # \_\_\_\_\_ Signature \_\_\_\_\_  
(please print) ApHCC member not related to applicant