



## MEMBERSHIP APPLICATION

1. Name \_\_\_\_\_  
(Please print clearly)

2. Address \_\_\_\_\_

3. Telephone \_\_\_\_\_ Email \_\_\_\_\_

4. I am a polo player. Yes \_\_\_\_ No \_\_\_\_

5. I am a Breeder Yes \_\_\_\_ No \_\_\_\_

6. I am a Trainer Yes \_\_\_\_ No \_\_\_\_

7. I am an Instructor Yes \_\_\_\_ No \_\_\_\_

8. Are you a Farm / Ranch owner? Yes \_\_\_\_ No \_\_\_\_

9. How did you hear about us? \_\_\_\_\_

### **MEMBERSHIP BENEFITS:**

A subscription to the "Polo Pony News" the official Newsletter of the American Polo Horse Association, a discounted registration rate when registering a horse/s and an American Polo Horse Association Window Decal.

#### **Annual Membership Fee: \$30 \_\_\_\_\_**

I understand that my annual Membership is valid from January 1 to December 31 of the year in which Membership is purchased and can be terminated by the Association at any time for due cause under the Rules and Regulations which are posted on the website americanpolohorse.com. Rules and Regulations can also be obtained by calling the Association at 561.312.5201 and requesting a copy

**or**

#### **Lifetime Membership Fee \$ 400 \_\_\_\_\_**

I understand that my Lifetime Membership can be terminated by the Association at any time for due cause under the Rules and Regulations which are posted on the website americanpolohorse.com. Rules and Regulations can also be obtained by calling the Association at 561.312.5201 and requesting a copy

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**Fee enclosed \$ \_\_\_\_\_**

**Payable to: American Polo Horse Association Inc.**

**Mail to the address below.**

For Office Use Only \_\_\_\_\_

DR

MNG

DWPS