



1st Adult (or child) Name (Last, First, Middle Initial) _____

Address: _____ CITY _____ ST _____ ZIP _____

Home Phone: () _____ Cell Phone: () _____

Do you need Assistance Card? No Yes
Do you need a Professional Card? No Yes

I certify that I am applying for an Assistance Card/Professional Card and that I meet the requirements for Assistance/Professional status in accordance with the applicable section of the current WHOA rulebook.

Date of Birth M: _____ D: _____ Signature _____

2nd Adult (or child) Name (Last, First, Middle Initial) _____

Home Phone: () _____ Cell Phone: () _____

Do you need Assistance Card? No Yes
Do you need a Professional Card? No Yes

I certify that I am applying for an Assistance Card/Professional Card and that I meet the requirements for Assistance/Professional status in accordance with the applicable section of the current WHOA rulebook.

Date of Birth M: _____ D: _____ Signature _____

T-Shirts - Hats - Uniforms - Embroidery - Signs - Banners
Car & Truck Lettering

**PATRIOT
SIGNS
& Screen Printing**

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IF INCLUDED IN _____

1) First & last name: _____ DOB: / /

2) _____ DOB: / /

3) _____ DOB: / /

*E-MAIL ADDRESS: _____

MEMBERSHIP INCLUDES IS REQUIRED AT WHOA AFFILIATED/SPONSORED SHOWS/EVENTS AND PROGRAMS. IF YOU EXHIBIT HORSES WITHOUT A VALID CARD YOU ARE AT RISK FOR SUSPENSION.

- REGULAR Membership/Professional Card \$75
- YOUTH Membership/Youth Card (17 & Under) \$25
- FAMILY Membership/Master Card (2 Adults) Children 17 & Under within household - \$135
- LIFETIME Membership (1 Person under 50 years old) - \$1,000
- LIFETIME Membership (1 Person 50-59 years old) - \$800
- LIFETIME Membership (1 Person 60-69 years old) - \$600
- LIFETIME Membership (1 Person 70-79 years old) - \$300
- LIFETIME Membership (1 Person 80+ years) - \$200
- ASSOCIATE Membership (Business or individual, non horse owner, no voting privileges) - \$80

PAYMENT METHOD: Check Amount: \$ _____ (made payable to WHOA)

VISA/MC/Discover/AMX Card No: _____ Exp: _____ Sec Code: _____

No Returns
Mail to: WHOA, P.O. Box 4007, Murfreesboro, TN 37139
Fax to: (615) 494-8825 Phone: (615) 494-8823
Join online at www.walkinghorseowners.com - Email required
Email: joinwhoa@aol.com