



Paso Fino Horse Association, Incorporated

4047 Iron Works Parkway, Suite 1, Lexington, KY 40511 (859) 825-6000 FAX (859) 258-2125 www.pfha.org

MEMBERSHIP APPLICATION / RENEWAL

NEW MEMBER RENEWAL PFHA MEMBERSHIP NUMBER _____ CHECK HERE IF ADDRESS CHANGED

Last Name: _____ First Name: _____ Middle Initial _____

If under the age of 18 as of September 1st, please provide your Date of Birth: ___/___/___ (MM/DD/YYYY)

If you want to participate as an Amateur Owner, check here and submit an Application for Amateur Owner/Senior Amateur Owner Card. See PFHA Rule Book for Amateur Owner eligibility requirements.

Address: _____

City: _____ State: _____ Country: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Fax: _____ E-Mail Address: _____

Signature: _____

STANDARD MEMBERSHIP CATEGORIES: (All fees are in U.S. dollars)	One (1) Year Membership	Three (3) Year Membership
Individual - United States	<input type="checkbox"/> \$ 55.00	<input type="checkbox"/> \$155.00
Junior - United States Date of Birth Required ___/___/___	<input type="checkbox"/> \$ 35.00	<input type="checkbox"/> \$100.00
Family - United States (Includes second individual (over18) living at above address)	<input type="checkbox"/> \$ 75.00	<input type="checkbox"/> \$215.00
Business/Corporation - United States	<input type="checkbox"/> \$ 75.00	<input type="checkbox"/> \$215.00
Individual - Canada & Mexico	<input type="checkbox"/> \$ 75.00	<input type="checkbox"/> \$215.00
Junior - Canada & Mexico Date of Birth Required ___/___/___	<input type="checkbox"/> \$ 55.00	<input type="checkbox"/> \$160.00
Family - Canada & Mexico (Includes second individual (over18) living at above address)	<input type="checkbox"/> \$ 95.00	<input type="checkbox"/> \$275.00
Business/Corporation - Canada & Mexico	<input type="checkbox"/> \$ 95.00	<input type="checkbox"/> \$275.00
Individual - All other international	<input type="checkbox"/> \$125.00	<input type="checkbox"/> \$365.00
Junior - All other international Date of Birth Required ___/___/___	<input type="checkbox"/> \$105.00	<input type="checkbox"/> \$310.00
Family - All other international (Includes second individual (over18) living at above address)	<input type="checkbox"/> \$145.00	<input type="checkbox"/> \$425.00
Business/Corporation - All other international	<input type="checkbox"/> \$145.00	<input type="checkbox"/> \$425.00

For Family Members:

Name of Second Family member over 18 living at above address: _____ PFHA Membership # _____

Family Youth (Must be under 18 as of September 1st and lives at above address. Must include date of birth (MM/DD/YYYY))

Name: _____ PFHA Membership # _____ Date of Birth: ___/___/___

Name: _____ PFHA Membership # _____ Date of Birth: ___/___/___

Name: _____ PFHA Membership # _____ Date of Birth: ___/___/___

For Business/Corporations:

Name of Business/Corporation _____ PFHA Membership # _____

LIFE MEMBERSHIP CATEGORIES: (All fees are in U.S. dollars)	
All Life Memberships include a subscription to the Paso Fino Horse World Magazine	
Life - United States	<input type="checkbox"/> \$1,000.00
Life - International	<input type="checkbox"/> \$1,500.00
Golden Life - United States (Farm Directory List, Business Card Ad-8 Issues)	<input type="checkbox"/> \$1,500.00
Golden Life - International (Farm Directory List, Business Card Ad-8 Issues)	<input type="checkbox"/> \$2,000.00

If you wish to purchase a hardcopy paper version of the PFHA Rule Book, please check one:

\$20.00

If applying or renewing membership at a show, provide region sponsoring the show _____ name of show _____ and date of show ___/___/___ (MM/DD/YYYY)

NAME OF MEMBER: _____ **PFHA MEMBERSHIP NUMBER:** _____

Regional Voting Designation: Please select one PFHA region under which your vote will be counted at the national level. The PFHA delegate of your chosen region will represent you at upcoming Paso Fino Horse Association (PFHA) Board of Directors Meetings. If you do not select one of the choices below, your official regional voting designation will be determined by the geographical location of your address. The states within the regions are in parenthesis following the region's name.

<input type="checkbox"/> Central Canada (Ontario, Quebec, New Brunswick, Nova Scotia, Prince Edwards Island, New Foundland)	<input type="checkbox"/> Florida (Southern FL zip codes 32900-33399, Puerto Rico, Caribbean, South America except Colombia)	<input type="checkbox"/> Mason Dixon (Washington DC, PA, MD, NJ, DE, WV zip codes 24900-25899, 26000-26899)	<input type="checkbox"/> Northwest (WA, OR, ID, MT, WY, AK, Canadian provinces of Alberta, British Columbia, Saskatchewan)
<input type="checkbox"/> Georgia (GA North of the direct line from Brunswick to Perry then due west to Columbus)	<input type="checkbox"/> North Florida (Northern FL zip codes 32000-32699, 34600-34699)	<input type="checkbox"/> Piedmont (NC, SC, WV zip codes 24700-24899, 259XX)	<input type="checkbox"/> Northeast (NY, VT, CT, MA, NH, ME, RI)
<input type="checkbox"/> Gulf (AL, GA South of the direct line from Brunswick to Perry, then due west of Columbus)	<input type="checkbox"/> Southern (West Central FL zip codes 32700-32899, 33500-34599, over 34700)	<input type="checkbox"/> High Plains (KS)	<input type="checkbox"/> Mid-America (ND, SD, NE, MN, IA, Canadian province of Manitoba)
<input type="checkbox"/> Deep South (LA zip codes 70000-70899, MS)	<input type="checkbox"/> Sunshine (East Central FL zip codes 33400-33499)	<input type="checkbox"/> Kentucky (KY)	<input type="checkbox"/> Ozark Empire (MO)
<input type="checkbox"/> South Western (LA zip codes 71000-71499, TX, OK, AR)	<input type="checkbox"/> California (CA, NV, HI, Central America)	<input type="checkbox"/> Great Lakes (WI, IL, IN, OH, MI)	<input type="checkbox"/> Tennessee Valley (TN)
<input type="checkbox"/> Europe	<input type="checkbox"/> Great Western (UT, CO, AZ, NM)	<input type="checkbox"/> Colombia	<input type="checkbox"/> Virginia Presidential (VA)
<input type="checkbox"/> None specified. Do not want to affiliate with a regional group.			

AMATEUR STATUS :

I certify that I have read and understand the Amateur Rule as published in the most current Paso Fino Horse Association Rule Book and am eligible for amateur status under all conditions of the rule.

Signature of Individual Amateur member: _____ Printed name: _____

Birth Date if over 62 as of September 1st ___/___/___ (MM/DD/YYYY)

Signature of Second Family member: _____ Printed name: _____

Birth Date if over 62 as of September 1st ___/___/___ (MM/DD/YYYY)

Signature of Family Youth member: _____ Printed name: _____

Signature of Family Youth member: _____ Printed name: _____

Signature of Family Youth member: _____ Printed name: _____

METHOD OF PAYMENT: (Do Not send cash.) Check/Money Order Payable to PFHA VISA MASTERCARD AMEX

Amount Paid \$ _____

Card Number: _____ Expiration Date: _____ Security Code: _____

Card Holder's Name: _____

Card Holder's Address: _____

Card Holder's City: _____ State: _____ Country: _____ Zip: _____

Card Holder's Home Phone: _____ Cell Phone: _____ Work Phone: _____

Card Holder's Fax: _____ E-Mail Address: _____

Card Holder's Signature: _____

INSTRUCTIONS FOR PROCESSING THIS FORM:

1. This form is used to register or renew a member, a family, or a business with the Paso Fino Horse Association (PFHA). **PFHA membership runs from October 1st through September 30th.** The membership includes a subscription to the Paso Fino Horse World Magazine for the duration of the membership.
2. In order to compete at PFHA sponsored shows or participate in PFHA recreational rider programs, you must be a member of PFHA.
3. If the member wishes to become a member of a PFHA Region, they will need to submit a separate application to the region. Regional contact information is located on the PFHA website at www.pfha.org. The designation of a region on this form is for determining under which region your vote will be counted at the national level.
4. If you are a member that is eligible to be an Amateur Owner, please complete and submit an Application for Amateur Owner/ Senior Amateur Owner Card. See PFHA Rule Book for Amateur Owner eligibility. The Amateur Owner/Senior Amateur Owner Card Application can be downloaded from the PFHA website at www.pfha.org.
5. Mail this form and, if applicable, the Amateur Owner/Senior Amateur Owner Card Application and the total payment of items checked on this form to: Paso Fino Horse Association; 4047 Iron Works Parkway, Suite 1; Lexington, KY 40511

All Memberships Will Expire September 30, despite when they are purchased