



# 2023 VQHA MEMBERSHIP

[WWW.VTQHA.ORG](http://WWW.VTQHA.ORG)

\_\_\_ \$25 Individual Membership

\_\_\_ \$40 Joint (legal partners)

\_\_\_ \$15 Youth

\_\_\_ \$50 Family

\_\_\_ \$250 Life Time Membership

### Membership Information

Name: \_\_\_\_\_ AQHA ID# \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

List Family Members: \_\_\_\_\_

### Intent to Show (Included in your membership)

For members wishing to accumulate points for year end awards.

Horse's Name: \_\_\_\_\_ Horse's Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Owner's Name: \_\_\_\_\_

Exhibitor: \_\_\_\_\_ Exhibitor: \_\_\_\_\_

Horse's Name: \_\_\_\_\_ Horse's Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Owner's Name: \_\_\_\_\_

Exhibitor: \_\_\_\_\_ Exhibitor: \_\_\_\_\_

Please mail completed form and due to: Megan Volk 1270 Case St. A Middlebury, VT 05753

Checks payable to VQHA

\*\*\*\*\*Office use Only\*\*\*\*\*

DATE PAID: \_\_\_\_\_ AMOUNT: \_\_\_\_\_ CASH: \_\_\_\_\_ CHECK#: \_\_\_\_\_