



## Member Information

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Representative for  
(Enter farm name) \_\_\_\_\_

APHA # \_\_\_\_\_ NSBA # \_\_\_\_\_

## Membership Level

Adult/Individual	\$25.00	<input type="checkbox"/>
Family (Husband/Wife)	\$40.00	<input type="checkbox"/>
Youth (18 & under)	\$10.00	<input type="checkbox"/>
Date of Birth:		

## Areas of Interest

Amateur  Youth  Halter  Performance  Race  Roping  Cutting  Ranch  All Breed

*I do hereby make application for membership in the Paint Horse Club of Oklahoma and do agree to abide by the laws and bylaws of the Paint Horse Club of Oklahoma*

X Signature \_\_\_\_\_ Date \_\_\_\_\_

## Method of Payment

Amount Paid \_\_\_\_\_ Cash or Check # \_\_\_\_\_

**If paying by credit card, please complete the following:**

*By entering my credit card information and signing below, I am authorizing all charges necessary to complete this file.*

Mastercard  Visa  American Ex

Card No \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVV# \_\_\_\_\_

Name on Card \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(Address of card holder if not the same as the person above.)

Phone number \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_

Mail to: Jan Uhrhan 2915 108<sup>th</sup> Ave SE Norman, OK 73026

## Office Use Only

Membership Card Provided on \_\_\_\_\_ Card # \_\_\_\_\_