

Georgia Walking Horse Exhibitor's Association

2012 Membership Form

Due by March 15th, 2012

Name(s) (as it should appear on membership roster):

Children under age 17:

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax Number: _____

E-mail: _____

(Please include email address for periodic email updates)

Dues for 2012

(Please indicate which type membership)

_____ Adult Membership: \$40

_____ Family Membership: \$60

_____ *Junior Membership: \$10

_____ *Life Membership: FREE

_____ Associate Membership \$40

*Junior Memberships apply to individuals 17 yrs. & under

* Life Memberships includes: Past Presidents and Five Year Members 65 and over

****Check your Preference: RECEIVE AMBLER BY : ___E-MAIL OR ___MAIL****

Payment Method:

_____ Check # _____ Make Payable to GWHEA

_____ Cash

*** Notice – You must be a member of the GWHEA in order to qualify for any high point awards at the end of the year.

Mail to: GWHEA
P.O. Box 486
Cornelia, GA 30531

For more information: denisecoleman75@gmail.com