

## PMHA Membership Application 20\_\_\_\_\_

☐ New

☐ Renewal

PMHA # \_\_\_\_\_

Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Province/Country \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

FAX \_\_\_\_\_ Email \_\_\_\_\_

### Indicate any of the following:

**Owner/Non Breeder** ☐ Gelding ☐ Mares

**Owner/Breeder** Own: ☐ Morabs ☐ Arabians ☐ Morgans ☐ Other

**Show** ☐ Western ☐ Hunter ☐ Country/English ☐ Driving ☐ Trail

☐ Dressage ☐ Endurance/Competitive Trail ☐ Eventing ☐ Hunter/Jumper

**Other:** ☐ Pleasure Trail ☐ Family Fun ☐ Youth/4-H ☐ Carriage/Driving  
☐ Reining/Cutting ☐ Contest ☐ Team Penning

I would like information about PMHA Awards Program ☐

### Membership Fees:

Individual \$30

Family \$45

Youth \$15

Club \$50

Corporation \$100

PMHA membership fees are from  
January 1 to December 31 of each year

PMHA membership provides reduced  
registration fees and entry into the PMHA  
Awards Program.

Please make check payable to PMHA

### Mail to:

**PMHA**  
**P.O. Box 802**  
**Georgetown, KY 40324**  
**502 -353-4803 or 270-735-5331**  
[www.puremorab.com](http://www.puremorab.com)

**Please include the correct  
membership fee**

**Revised Spring 2021**