



# Conejo Valley Arabian Horse Association

www.cvaha.org

## Membership Application

*I hereby apply for membership in the Conejo Valley Arabian Horse Association (CVAHA).  
I promise to conform to the by-laws and rules of this club.*

**For AHA membership you MUST include birth date and social security number.**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_ Ph ( \_\_\_\_\_ ) \_\_\_\_\_

E: Mail Address \_\_\_\_\_ Would you like to receive email news? \_\_\_\_\_

### Please Check Type of Membership

- AHA 1 Year Adult + CVAHA..... \$40.00
- AHA 1 Year Adult Competition + CVAHA ..... \$60.00
- AHA 1 Year Youth Membership + CVAHA ..... \$20.00
- AHA 1 Year Youth Membership Competition + CVAHA..... \$30.00
- AHA 3 Years Adult + CVAHA ..... \$115.00
- AHA 3 Years Adult Competition + CVAHA ..... \$175.00
- CVAHBA Social Membership Adult ..... \$18.00
- CVAHBA Social Family Membership ..... \$25.00
- AHA **Renewal** LATE FEES (does not apply to new members) (after Dec. 31<sup>st</sup>) ADD \$10.00

<u>AHA Member's Name</u>	<u>AHA#</u>	<u>Soc. Sec. #</u>	<u>Birthdate</u>
_____	_____	____ - ____ - _____	_____
_____	_____	____ - ____ - _____	_____

If this is a family membership, please list all names: (include youth's age & birthdate)

\_\_\_\_\_

What activities would you like to see our club support?

\_\_\_\_\_

Would you be willing to serve or help on a committee?  Yes  No If yes ,which? \_\_\_\_\_

**Please forward application to:** Conejo Valley Arabian Horse Association, P.O. BOX 941113, Simi Valley, CA 93094  
**Please make checks payable to "CVAHA",**  
**new applications are processed by the 25th of each month.**  
**Questions? Please Contact:** LEE MURRAY 805-660-3400

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_