

2024 MEMBERSHIP FORM

New Membership

[] Renewing Membership

*(In order to be eligible for KyQHA Breeders' Incentive Fund payouts for events held in 2023, you must be a 2024 KyQHA and AQHA member NO LATER THAN July 1, 2024). AQHA membership numbers MUST MATCH exactly as recorded on horse's COR.

KyQHA Membership (Also required for all Youth Memberships)				KyQHA Membership Dues		
Name		AQHA #		\$25 per year		
Please provide your membership number EXACTLY as it appears on your AQHA membership card. For BIF provide the membership number for the OWNER of the horse.				Please indicate by placing an asterisk (*) next to the name above of all declared Amateurs.		
Farm/Ranch Name				Youth Association Membership Dues \$10 per		
Address				Youth per year		
City			(must also have KyQHA membership)			
State Zip				Interest Categories Check all that apply:		
Home Phone Cell Phone						
Fax	_ E-mail			• • •		
Youth Membership (Youth who have not reached 19th birthday as of Jan. 1, 2024 are eligible. One KyQHA Membership is required from a parent/guardian for all related youths.)				Incentive Fund * [] Showing [] Sprint Racing [] Recreation/Trail Riding		
Youth Name		AQHA #				
Date of Birth (required)		Youth Cell		Payment Methods		
Parent/Guardian (if different than above)				1. Check #		
Address	ddress City			Make Payable & Mail to: KyQHA		
County				PO Box 85 Eastwood, KY 40018-0085		
Youth Email				2. Pay by Credit Card		
Youth Name		AQHA #		(+\$3 Convenience Fee)		
Date of Birth (required)	-	Youth Cell		Circle Type: Visa MC DISC		
Parent/Guardian (if differen	nt than above) _.			Cardholder Name:		
Address		_ City		cardioider Name.		
County	State	Zip				
Youth Email				Card #:		
Note to Amateurs - As long as you qualify as an Amateur according to the AQHA Official Handbook of Rules and Regulations (see rule GEN116), you will be considered an Amateur by KyQHA. Distribution of Contact Information: KyQHA sends its membership regular electronic communications to keep them informed about association developments an equine industry news and events. KyQHA does not provide your email to third parties asking to distribute non-association communications. If you do not wish your				Exp Date: 3 Digit Code: Cardholder Signature:		
contact information to be listed in a printed publication, please check below: [] DO NOT print my contact information in KyQHA publications. NOTE: ONLY ONE VOTE PER PAID MEMBERSHIP IN KYOHA				Cardilolder Signature:		