



## MEMBERSHIP APPLICATION

*Be Sure to Complete the Form*

NEW:  RENEWAL:  ANNUAL MEMBERSHIP FEES: YOUTH--\$5 (sponsored) / INDIVIDUAL--\$30/ FAMILY--\$40

DATE: \_\_\_\_\_ PMT FOR MEMBERSHIP YEAR OF: \_\_\_\_\_ Paid by: \_\_\_\_\_

NAMES(S): \_\_\_\_\_

Youth (UNDER 18 YRS): \_\_\_\_\_ DOB: \_\_\_\_\_

FARM NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY STATE ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

How would you prefer your correspondence, regarding club matters? Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Website: \_\_\_\_\_

I may have interest in the following Club/ Miniature Horse activities and/or club committees—

Show Volunteer  Marketing/Advertising/ Promotions  Youth Activities  Amateur Activities

Other: \_\_\_\_\_.

I would like to become a Sponsor for the 2026 Evergreen Spectacular

Yes  No Which Class(es)? \_\_\_\_\_

*Class Sponsorships are \$35.00 per class and Champion or Grand Classes are \$55.00.*

*Any Denomination for a donation is welcome and appreciated.*

I (we) have read the Bylaws of the EMHC (available on the EMHC website) and any amendments hereafter, and agree to abide by those Bylaws and decisions made by the Executive Board pertaining to the acceptance or termination of my (our) membership.

***Membership must be received by April 1<sup>st</sup> to be eligible for Year End Awards.***

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

*(Membership runs Jan.1-Dec.31, no prorations. Family – 2 Adults from same household and related children under 18 years of age.) \*See Bylaws For Office: DATE REC'D- Pd by: Ck# \_\_\_\_\_, CC \_\_\_\_\_ Cash \_\_\_\_\_*

Mail Check and completed form to EMHC – President, Cindy Morris  
11904 Burn Rd, Arlington, WA 98223 / Ph: 425-308-8527