

**2015 ARK-LA-TEX PAINT HORSE CLUB  
MEMBERSHIP APPLICATION**

\_\_\_\_ Yes, I want to be a member of the Ark-La-Tex Paint Horse Club. By joining, I agree to obtain and abide by club rules during my membership in order to qualify for year-end awards.

\_\_\_\_ Single and Family Membership \$20.00 (includes unmarried children 18 & U)

Name \_\_\_\_\_

Family or Corp/Farm Members \_\_\_\_\_

\_\_\_\_\_  
(please put youth birthdates)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ APHA ID# \_\_\_\_\_

Email \_\_\_\_\_

MAIL TO:  
Buffy King, Treasurer  
Ark-La-Tex Paint Horse Club  
PO Box 453  
Zwolle, LA 71486