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**MEMBERSHIP APPLICATION**  
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Annual Dues

Individual adult membership	\$23	(If paid by March 1, name will be included in a raffle of mini-related item.)
Farm or Family membership	\$33	
Youth only membership (17 years old or younger)	\$13	

New Member _____ **or** **Renewal** _____

Date _____

Name(s)(include all family members) _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____ **Email** _____

Farm Name (optional) _____

Website (optional) _____

For Junior Members Only: **Date of birth** _____ / _____ / _____

Signature of Sponsor _____

Our membership list is shared with other organizations. If you do not want your name shared please check here. _____
By applying for membership in the Adirondack Miniature Horse Club, I (we) affirm that as a member(s) of AMHC, I (we) will honor and uphold the bylaws of the Adirondack Miniature Horse Club.

Signature _____ **Signature** _____

Send to: Adirondack Miniature Horse Club, Becky Montano, 530 County Hwy 102,
Gloversville, NY 12078