



pennsylvaniaequinecouncil.org

MEMBERSHIP APPLICATION
PLEASE INDICATE YEAR: _____ (REQUIRED)
All memberships expire on December 31

- | | |
|--|--|
| <input type="checkbox"/> Individual \$ 25.00 | <input type="checkbox"/> Individual Plus Equisure \$ 46.00 |
| <input type="checkbox"/> Family \$ 35.00 #_____ adult #_____ children; Includes spouse/partner & children <u>under</u> 18 living in the household | <input type="checkbox"/> Family Plus Equisure \$ 75.00 #_____ adult #_____ children; Includes spouse/partner & children <u>under</u> 18 living in the household |
| <input type="checkbox"/> Association \$ 35.00 #_____ members; Membership of any organized equine group (<u>min.10 members</u>) such as riding clubs or breed associations | <input type="checkbox"/> Association Plus \$ 80.00 #_____ members; Includes \$1,000,000 General Liability and Directors' & Officers coverage for member only events. |
| <input type="checkbox"/> Business \$120.00 Receive website link in the e-directory and business section on our website, also a 3" x 2.5" sized ad (business card) in each issue of the <i>HorsePower</i> newsletter. | <input type="checkbox"/> Lifetime \$ 500.00 (One adult) <i>Liability insurance may be purchased on a yearly basis.</i> |
| <input type="checkbox"/> Collegiate \$ 35.00 #_____ members; PA College & University groups | <input type="checkbox"/> Youth \$10.00 (12 yrs. To 17 yrs. of age) |
| <input type="checkbox"/> 4-H Horse Club Free #_____ members (<i>Be sure to list club name; along with a contact name.</i>) | |

PLEASE PRINT:

CONTACT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ COUNTY: _____

E-MAIL: _____

BUSINESS / ASSOCIATION / CLUB: _____

Youth Membership (Parent Signature): _____

*Send form along with your check payable to:

Pennsylvania Equine Council, PO Box 633, Punxsutawney, PA 15767

1-888-304-0281