



**Georgia Walking Horse Exhibitor's Association
2016 Membership Form
Due by March 15th, 2016**

Name(s) (as it should appear on membership roster) *(Only two adults per household per family membership)*: _____

Children age 17 & Under **(Any children 18 & older in your family will need to apply for their own membership & they must be your children. All other children may apply for a Junior Membership)*:*

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax Number: _____

E-mail: _____

(Please include email address for receiving periodic email updates)

Dues for 2016

(Please indicate which type of membership & how many)

- _____ Adult Membership: \$20
- _____ Family Membership: \$40
- _____ *Junior Membership: \$10
- _____ **Life Membership: FREE
- _____ Associate Membership \$20

*Junior Memberships apply to individuals 17 yrs. & under

** Life Memberships include Past Presidents & Five Year Members age 65 and over. You must notify us the first year you are eligible for Life membership.

_____ **Total Dues for 2016**

Payment Method:

Cash Check # _____ (Make check payable to GWHEA)

*** Notice – You must be a member of the GWHEA in order to qualify for any high point awards at the end of the year. Points will begin accumulating on the date your payment is received by the Association.

Mail to: GWHEA
Paula Cash, Treasurer
2342 Jug Road NW
Monroe, GA 30656

For more information:
Paula Cash /Treasurer/Membership
Chairman Pcash5@yahoo.com
or
GWHEAmembers@windstream.net
or 770-207-1837