



**IDAHO QUARTER HORSE ASSOCIATION
MEMBERSHIP
APPLICATION**
(January 1 – December 31, 2021)

Name _____
 Address _____
 City _____ County _____ State _____ Zip _____
 Phone _____ E-mail _____
 AQHA MEMBERSHIP # _____ AQHA MEMBERSHIP # _____

**(IQHYA MEMBERSHIP IS NOT INCLUDED IN FAMILY MEMMBERSHIP
TO BE ELIGIBLE FOR YOUTH POINTS, YOUTH MUST JOIN IQHYA)**

Youth Name _____ DOB _____ E-Mail _____
 Youth Name _____ DOB _____ E-Mail _____
 AQHA # _____ AQHA # _____

Name of Horse _____ Yr Foaled _____ Back # _____
 AQHA # _____ State Foaled _____ Breeder _____
 Exact Name of Owner _____
 Exhibitors of this Horse _____ Open _____ Amateur _____ Select _____ Youth _____

Name of Horse _____ Yr Foaled _____ Back # _____
 AQHA # _____ State Foaled _____ Breeder _____
 Exact Name of Owner _____
 Exhibitors of this Horse _____ Open _____ Amateur _____ Select _____ Youth _____

____ IQHA FAMILY MEMBERSHIP.....\$ 30.00
 ____ INDIVIDUAL MEMBERSHIP\$ 25.00
 ____ YOUTH MEMBERSHIP.....\$ 10.00
 ____ HORSE NOMINATIONS (Point Keeping).....Per Horse.....\$ 20.00
 ____ ALLIED MERCHANT MEMBERSHIP\$ 75.00
 TOTAL AMOUNT ENCLOSED \$ _____

Money for points keeping & horse nominations must be sent in with membership

If not included points will not be kept

(PLEASE PRINT CLEARLY)

Make Check Payable To: IQHA MEMBERSHIP
 Mail To: **IQHA** PO Box 1517 Caldwell, ID 83606

FOR OFFICE USE ONLY
POSTMARK DATE _____ CHECK NUMBER _____ CASH _____