SAHIBA MEMBERSHIP APPLICATION □ NEW □ RENEWAL	
NAME:	
ADDRESS:	
CITY:	STATE: ZIP:
PHONE:	STATE: ZIP: FAX:
EMAIL:	
IF YOUTH MEMBER DAT	E OF BIRTH:
SS#:	AHA Membership Number:
	TEW MEMBERSHIPS BY COMPLETING THIS FORM AND TH THE CORRECT FEE'S MADE PAYABLE TO: <u>SAHIBA</u>
MAIL FORM AND CHEC	CK TO:
Jennifer Lewis	phone: 859-351-0038
551 Shoshoni Trail	Email: Jennifer-r-lewis@hotmail.com
Georgetown, KY 40324	
3 YR ADULT AFFILIAT ADULT ASSOCIATE: \$ BUSINESS: \$55.00 {Do MUST BE DONE ON YOUTH: \$50.00 {Inclu YOUTH ASSOCIATE: \$ LIFE: \$1000.00	voting rights, includes liability insurance & comp. card} TE: \$270 {voting rights, includes liability ins. & comp. card} \$25.00 {no voting rights, liability insurance, or Competition card} best not include liability insurance, other restrictions} NLINE at www.arabianhorses.org des voting rights for AHYA and competition card} \$10.00 {no voting rights, liability insurance, or Competition card}
Go to <u>www.arabianhorses.org</u> "Join" You will be given the options listed above for membership type.	
Please read carefully and choose the best membership suited for you, if showing choose affiliate or you <u>WILL NOT</u> get the competition card and it will cost you extra every time you show.	
Society for A	nu will want to make sure you are joining: A rabian Horses in the Bluegrass Area Club # 14265 A to AHA, but they will notify the membership chair.
PLEASE CHECK AREA IN WHICH YOU WOULD LIKE TO ASSIST: SASS Class "A" Open Shows Promotion Trail Rides Youth	
www.sahiba.org	