

# 2020 Membership Form

Please print very clearly. Thank You

Name \_\_\_\_\_

Address (Street, City, State, Zip)

\_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_

email (most communication through email) \_\_\_\_\_

Website: \_\_\_\_\_

Barn Name \_\_\_\_\_

Individual: \$15.00 (One Vote) \_\_\_\_\_

Family: \$25.00 (Two Votes) \_\_\_\_\_

Youth: \$10.00 (One Vote) \_\_\_\_\_

Membership for one year from January 1 through Dec. 31

Mail to Diane Walker  
1701 Melody Lane  
Cuba, MO 65453

MORROW HORSE CLUB

