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New York State Plantation Walking Horse Club
Membership Renewal

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Name(s): _____

Address _____

Phone: _____

Email address: _____

Receive Newsletter by email: _____ yes _____ no

Check one :

Family: \$25.00 (___)

Individual: \$15.00 (___)

Associate: (Newsletter only) \$10.00 (___)

Trail Pleasure Program: \$ 5.00/member # (___)

Total \$ _____ .00

Membership referral: 6 mo free

Name of Potential New Member: _____

Address: _____

Phone: _____

Email address: _____

Return this completed form and a check made out to NYSPWHC for the proper amount to:

Allan Sawyer
8621 Brown Rd
Sherburne, NY 13460