



## Northwest Gaited Horse Association 2023 Membership Application

Membership Name: \_\_\_\_\_

Stable Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Office: \_\_\_\_\_ Email: \_\_\_\_\_

Please send me my minutes via (please circle one): email \_\_\_\_\_ snail mail \_\_\_\_\_

☐ I do **not** wish my name, city, or state to be published on the website.

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### Please mark your membership type and provide the additional data requested.

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**Family Membership:** \_\_\_\_\_ \$35.00

Two voting members allowed per membership. Please indicate voting members and list **all** members who will be covered by this membership. Additional family members on back of form.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

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**Individual Adult: Renewal** \_\_\_\_\_ \$25.00

**\*\*2023 Membership sponsorship: Paid member will sponsor 1<sup>st</sup> time member (Individual or Young Adult, or Youth ) Name of Member Sponsor** \_\_\_\_\_

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**Young Adult (18-21 Years) Voting Privileges** \_\_\_\_\_ \$15.00

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**Youth: \$10.00** (No voting privileges, 17 years of age and under)

If parents or guardians are not members.

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**Parent/Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Parent or legal guardian MUST sign for youth)

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**Signature of Adult Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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**I (We) own a Gaited Horse Breed or type** \_\_\_\_\_

**I (We) are interested in** \_\_Show \_\_Trail Rides \_\_Pleasure riding (Arena) \_\_ Dressage \_\_Training \_\_Other (Explain)

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If you have questions please call Nancy Plunkett 503-816-3597

Checks made out to NWGHA

Please mail form and payment to:

Nancy Plunkett: 26280 SW Baker Rd: Sherwood, OR 97140

Additional forms available on website: [www.NWGHA.live](http://www.NWGHA.live)

Check out our website at [www.nwgha.live](http://www.nwgha.live)