AMHA Recognized Club Application

For Calendar Year_____

*For recognized club status, **both the President and Secretary must be current AMHA members, AND a club membership roster must be submitted with this application**.
Please see additional information requirements below.

Club Name_____

E-mail/Website_____

All club applications and renewals are due by February 15. Annual Fee is $55 (please enclose).

President _____**AMHA #** _____

Address _____

Phone _____ **Fax** _____ **E-mail**_____

Secretary _____**AMHA #** _____

Address _____

Phone _____ **Fax** _____ **E-mail**_____

Treasurer _____**AMHA #** _____

Address _____

Phone _____ **Fax** _____ **E-mail**_____

AMHA liaison_____**AMHA#** _____

Address _____

Phone _____ **Fax** _____ **E-mail**_____

Membership Director_____**AMHA#**_____

Address _____

Phone _____ **Fax** _____ **E-mail**_____

Newsletter Editor_____**AMHA#** _____

Address _____

Phone _____ **Fax** _____ **E-mail**_____

Additional Important Information

Which officer should we list as the contact person in The Network and website: _____

Which officer in addition to the club contact should receive the AMHA mailings: _____

Do you publish a Newsletter? ____**Yes** ____**No** **Number of current club members?**_____(please include roster)

Our Club would like to volunteer for the Full Circle Network to help at-risk Morgans: Yes_____ **No**_____
(Visit https://www.morganhorse.com/registry/full-circle/Full%20Circle%20Network/ for information on Full Circle)

____**Check Enclosed.** Please make check payable to American Morgan Horse Assn.
____**Credit Card*** as written below. ____VISA ____American Express ____MasterCard ____Discover

Card #_____CVV_____Exp_____Zip_____

Signature_____ Name on Card_____

Mail to: AMHA Recognized Clubs, 4037 Iron Works Pkwy Ste 130, Lexington, KY 40511-8508

Email to: nicole@morganhorse.com ~ Fax to: (859) 287-3555

Contact Nikki Dumas with questions (859) 448-5109. *Thank you for promoting our Morgan horse!*

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