



American Saddle Horse Breeders Futurity of Wisconsin, Inc.

MEMBERSHIP APPLICATION

Membership \$25.00
Effective January 1 through December 31

PLEASE PRINT

Today's Date _____

Name _____

One vote per membership

Farm Name _____

Social Security or Business ID Number _____
(Needed for prize money distribution)

Address _____

City _____ State _____ Zip _____

Cell Phone: _____ Home/Bus Phone: _____

E-Mail _____

Mail this form with a check for \$25.00 payable to:

ASHB Futurity of Wisconsin, Inc.
c/o Paulette Healey
11125 N. Crestline Road
Mequon, WI 53092-4901
Phone: 262-242-2559
phealey308@aol.com