

New Jersey Horse Council

MEMBERSHIP APPLICATION For Year ending December 31, 2010

Indicate Category desired;

_____ Organizational Membership or _____ Commercial Membership \$100.00
_____ Individual Membership / 1 yr = \$ 25.00 or _____ Life Individual Membership = \$300.00
_____ Youth Membership (under 21 yrs) (non voting) \$10.00

I (We) have added the following to our membership check:

\$ _____ toward the NJ New Jersey Equine Veterinary Student Summer Fellowship
\$ _____ toward Equine Rescue Support fund Total amount of check \$ _____

Individual Membership Name _____
Address _____
_____ Zip _____
Phone _____ Fax _____ E Mail _____

Check here if we can email your newsletter to you. Save a tree, save the NJHC money, and get your newsletter quicker, and in color. Your email address will not be released to other organizations or businesses.

Please list other equine organization to which you belong : _____

ORGANIZATIONAL & COMMERCIAL MEMBERS Organizations can submit 3 names and addresses. We will send newsletters and mailings to 3 addresses. Organizations will get two votes. Please complete the following:

Internet address: _____ email address: _____

President: _____ ph: _____
Address: _____ fax: _____
_____ Zip _____ Email: _____

Vice Pres or delegate: _____ ph: _____
Address: _____ fax: _____
_____ Zip _____ Email: _____

Secretary or Alternate Delegate: _____ ph: _____
Address: _____ fax: _____
_____ Zip _____ Email: _____

Please return completed form and check to New Jersey Horse Council, 25 Beth Drive, Moorestown, NJ 08057