



WEST MICHIGAN ARABIAN HORSE ASSOCIATION

**Year End Awards Program
Enrollment Form**

Are you a current WMAHA member? No Yes

**Current WMAHA Members as of the first WMAHA show are automatically enrolled, no need to fill out this form.*

Exhibitor Name: _____

Address: _____

City/State/Zip: _____

Email: _____

Cell Phone (Adult) : _____

Exhibitor Date of Birth: _____

Program Cost

Youth: \$5.00 *Person responsible for payment:* _____
Amateur: \$10.00

Name of Horse: _____

Select one: Arabian Half-Arabian Open Breed

Exhibitor Age Group

**Exhibitor must select one age group for points to accumulate per year.*

Select one:

W/T 10 & Under	W/T 11 & Over	11-14	15-18
19-49	50 & Over	Leadline	Walk Only

Mail completed form and payment to:

Brooke Carlson
4300 Quincy St.
Hudsonville, MI 49426
emberridgearabians@gmail.com
*Make checks out to **WMAHA***

Please contact Brooke if you prefer to pay via cash at our 1st WMAHA Community Show or prior events

~Professionals are not eligible for our WMAHA Year End Awards Program.
~Please fill out one form per horse/rider combo (no additional cost for multiple horses)