



MEMBERSHIP APPLICATION

New Membership Application **Membership Renewal**

Individual Individual Three Year Individual Lifetime Family Junior Junior Lifetime

Name:

Address:

City: State: Zip Code:

Phone: Email:

- I am a United States Citizen and/or my primary residence* is the United States. **Primary Residence - must reside in the US for a minimum of 6 months and one day per calendar year to be eligible.*
- I prefer **not** to receive a copy of the *Quarterly* magazine in the US Mail.

Regional Club (optional):

If you have selected a **Family Membership** please complete the following for the second adult and any children to be included in the membership (use the back of the page to add more family members):

Name	Year of Birth (juniors only)	Email (optional)

Farm Listing Paid members of the USIHC may opt to include a farm listing on the Congress' website (www.icelandics.org) and printed in *The Icelandic Horse Quarterly*. There is a \$110.00 annual fee for the farm listing in addition to your membership fee.

Farm: Owners:

Address:

City: State: Zip Code:

Phone: Email: Web:

Membership Fees & Restrictions	
Individual	\$60/year \$150/ Three Year Membership \$1200/ Lifetime Membership
Family	\$80/year Two adults and unlimited children (under 18 years) living in the same household. Adults can vote.
Junior	\$50/year or \$280/Lifetime membership One child (under 18 years). Not eligible to vote. Lifetime membership is valid until 18.

Membership Fee:	\$.....
Farm Listing Fee:	\$.....
W/C Fund Donation:	\$..... (optional support for the World Champion team)
Youth Fund Donation:	\$..... (optional support for youth programs)
Breeding Fund Donation:	\$..... (optional support for Breeding Evaluations)
Total:	\$.....

Please make checks payable to "USIHC" and mail to the address below:

USIHC c/o Sabrina Bateman

156 Coon Club Rd Bristol, VT 05443

(866) 929-0009 [ext 1]

info@icelandics.org

Your membership expires on the anniversary of your payment except for Individual Lifetime Memberships.