



HORSE CONGRESS

MEMBERSHIP APPLICATION

New Membership Application Membership Renewal
 Individual Family Junior Membership

Name:

Address:

City: State: Zip:

Phone: Email:

- Keep my name and contact information private.
- When possible, use my email address instead of the US Mail to notify me of official USIHC business.
- 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's web site (www.icelandics.org). There is a \$110.00 annual fee for the farm listing in addition to your membership fee.

Farm:

Owners:

Address:

City: State: Zip:

Phone: Email:

Fax: Web:

Membership Fees & Restrictions	
Individual	\$45/year. One adult. One vote.
Family	\$65/year. Two adults and unlimited children living in the same household. Adults vote.
Junior	\$35/year. One child (under 18 years). Not eligible to vote.
<i>Members with non-US mailing addresses must be US Citizens.</i>	

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

Make checks to "USIHC" and mail to the address below.