



Quarter Pony Association

Membership Application

Please circle one:

Junior (18 & Under) - \$15 Individual (Adult) - \$25 Family - \$30
Individual Lifetime - \$150 Family Lifetime - \$200

New: _____ Renewal: _____ Addition: _____

Renewals & Additions please include membership # _____

Primary Member Name: _____

Spouse/Significant other Name: _____

Family: (children, grandchildren, step children)

Child's Name:	DOB:	Child's Name:	DOB:

Mailing Address: _____ City: _____

State: _____ Zip: _____ Home Phone: _____ Cell Phone: _____

Email: _____

I hereby make application for membership/renewal in the Quarter Pony Association and agree to abide by the rules of QPA and or the directions of the Board of Directors.

Signatures: _____ Date: _____
(Parent or guardian signature required for Junior applicants)

A note about points: Both the exhibitor and the owner of the pony must be QPA members for Year End Award points to count. Upgrades and additions are available for all membership types. See the web page for details. www.quarterponyassociation.com

MAKE CHECK PAYABLE TO AND MAIL TO:
Quarter Pony Association
PO Box 104
Cambridge, PA 16403

Or it may be submitted with your Pony Registration papers. (Information will be forwarded to QPA for you.)

For Official Use Only: Process Date: _____ Region: _____ EJ Submission Date: _____

Membership Paid By: Check Paypal

Membership Packet Sent: _____ Date _____ US Mail E-Mail