## Membership Application (Membership runs from February 1st to January 31st)



Name:				
Farm Name:				
Mailing Address:				
Email:				
Phone #:				
What type of activities are you clinics pleasure open shows expos other:	interested in? (Circle)	keurings	breed specific shows play days	parades trail
	I	Membershi	p Fees	
One or more members of a finembers or Sport/Pleasure is breeding guidelines in accordand/or wife or domestic partrivote in SCFHA proceedings	members of FHANA. dance with the KFPS ners and children und and one member of the FHANA chapter	ns or residents with The family must he Fernal The	pe in good standing with FHA purpose of this category, a f Iteen (18) years. A family in o at least eighteen (18) years o	ANA and adheres to our pure
Any person who has an inter of FHANA, or is a Full or Ass	ociate member of ar	orse, who is a FHA nother FHANA cha	ANA member, non-FHANA m apter can become an Associa	nember, an Associate member ate Member of the SCFHA. An the Board, and is not eligible

Make checks payable to **SCFHA** and mail check and application to: (Membership fee may also be paid via PayPal via the website SCfriesianHA.com) Karen Rosenberg 3196 CR 3359 Saltillo, TX 75478