



OQHA Membership Number \_\_\_\_\_

5506 North Rockwell Avenue, Bethany, OK 73008

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### Membership Application

*Please fill out and return with fees to above address.*

All memberships will expire on the first Monday of October. Memberships will become effective on the day the application is processed in the OQHA office.

All registered **OWNERS** of competing horses in all divisions and all **EXHIBITORS** must be members of OQHA at the time of for points to count toward year-end awards. Please consult the *State Championship Rules* for eligibility of year-end awards. Youth must fulfill the meeting and fundraiser requirements to be eligible for year end awards.

Name of member: \_\_\_\_\_

Ranch Name or Parent's Name (if Youth): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth (For Amateur or Youth): \_\_\_\_\_

Date of Application: \_\_\_\_\_

**Please check ONE membership option:**

- |  |          |  |         |
|--|----------|--|---------|
| <input type="checkbox"/> Open – 1 Year         | \$25.00  | <input type="checkbox"/> Open – 3 Year         | \$70.00 |
| <input type="checkbox"/> Open/Amateur – 1 Year | \$30.00  | <input type="checkbox"/> Open/Amateur – 3 Year | \$85.00 |
| <input type="checkbox"/> Open/Youth – 1 Year   | \$35.00  | <input type="checkbox"/> Youth – 1 Year        | \$10.00 |
| <input type="checkbox"/> Youth Life            | \$100.00 | <input type="checkbox"/> Amateur – 1 Year      | \$5.00  |

*This Applies ONLY to those who already have a life membership and wish to compete in Amateur events.*

Signature of Applicant: \_\_\_\_\_

**NOTE:** If you exhibit or own a horse that competes in OQHA shows, all associated **exhibitor** AND **owner** AQHA I.D. numbers must have memberships in order for points to count toward OQHA year-end awards. IE: If the horse you exhibit is owned under a ranch name, both the exhibitor and ranch need OQHA memberships.

AQHA # \_\_\_\_\_ Name as listed on card: \_\_\_\_\_

*All cards will be charged a 4% processing fee*

My check is enclosed in the amount of \$ \_\_\_\_\_

Please charge my credit card \$ \_\_\_\_\_  Visa  MasterCard

Card Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Expiration: \_\_\_\_/\_\_\_\_

CSV: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Office Use Only**

Received: \_\_\_\_\_

Updated: \_\_\_\_\_

Mailed: \_\_\_\_\_