



**BC MINIATURE HORSE CLUB 20 _____
MEMBERSHIP APPLICATION**

INDIVIDUAL () \$35 FAMILY () \$45 YOUTH () \$10

FAMILY OR INDIVIDUAL NAME

ADDRESS & POSTAL CODE _____

PHONE _____ **FAX** _____

E-MAIL _____ **WEBSITE** _____

If FAMILY membership, please give NAMES and AGES of children under 18 as of January 1, of the current year

Name _____ Age _____ BD _____

Name _____ Age _____ BD _____

YOUTH MEMBER NAME _____ **Age** _____ **BD** _____

ADDRESS & POSTAL CODE

PHONE _____ **E-MAIL** _____

Name of Member Sponsor _____

Signature of Member Sponsor _____

Signature of Parent _____

As a non-profit association, BCMHC falls under PIPA, the Personal Information Protection Act, which states that we can collect your information and utilize it for the purpose for which we have received specific consent. We gather information for a contact list which includes your name, address, phone number and e-mail which will be given to the Executive for improved communication and contact with you. We also provide your name and contact information for the club website at www.miniaturehorsesbc.com and for a membership list which is provided to other club members. Photos and other materials may be used in newsletters, media articles, displays and show programs, directories or horse show results. Your consent to these purposes is specifically agreed. If you DO NOT AGREE, please initial here _____.

Please make cheque or e-transfer or money order payable to BCMHC and send to:
BCMHC c/o Cherie Kramer 4416 Lefevre rd. Abbotsford, BC V4X 1N8 604-240-0626
treasurerbcmhc@gmail.com