



## YOUTH MEMBERSHIP FORM 2018

Date: \_\_\_\_\_

Name: \_\_\_\_\_

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

City/Post. C: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Youth under the age of 18 are eligible.**

**Membership Fee is \$2 payable to the Ontario Haflinger Association.**

Please mail form and cheque to:

Martina Arth  
1850 Jerseyville Rd. W  
RR#1  
Jerseyville, ON  
L0R1R0

Please feel free to make as many copies as you need.