South Carolina Walking Horse Association

MEMBERSHIP APPLICATION

Mailed to: Darlene Buckner 3290 Camp Creek Rd Lancaster, SC 29720

Name:	
Spouse:	
Family Members or Members Under 18 Years of Age:	
1)	Age:
2)	Age:
3)	Age:
4)	Age:
Mailing Address:	
City: State: Zip:	
Email Address:	
Cell Phone:	
Before April 30 th	
Single Membership \$25 (Check/Cash)	
Family Membership \$35 (Check/Cash	
After April 30 th	
Single Membership \$30 (Check/Cash)	
Family Membership \$40 (Check/Cash	
New Membership Re	newal Membership

SCWHA High Points are eligible to be counted <u>ONLY After Both</u> Membership Application and Payment in full has been received. Rider, Trainer and Owner must all be members of SCWHA in order for points to count. Memberships received after printing deadline (TBD) will not be listed in the Annual SCWHA Directory/Calendar.