



ARABIAN RIDERS AND BREEDERS OF NORTHWEST ARKANSAS  
(ARAB IS AHA Club #9291)  
MEMBERSHIP APPLICATION

<http://ArabianofNWA.org>

**VISIT US ON FACEBOOK!**

Return to Dana Crawley, Membership Chair, 3198 N. Bentley Ridge, Fayetteville,  
AR 72704 - 812-606-8825 OR [dlladner@yahoo.com](mailto:dlladner@yahoo.com)

NAME: \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Home)

E-Mail Address \_\_\_\_\_ Farm Name \_\_\_\_\_

The Arabian Riders and Breeders of NW Arkansas is a member organization of the Arabian Horse Association.  
Please indicate the type of membership desired. *Please make checks payable to ARAB of NWA.*

- |   |       |               |
|---|-------|---------------|
| <input type="checkbox"/> ARAB/AHA ADULT INDIVIDUAL COMPETITION MEMBERSHIP<br>One Year (INCLUDES AHA \$50. ARAB \$15.00 <u>and</u> COMPETITION CARD \$35.00) | _____ | \$ 100.00 *** |
| <input type="checkbox"/> ARAB/AHA ADULT INDIVIDUAL MEMBERSHIP<br>One Year (INCLUDES AHA \$50. ARAB \$15. <u>WITHOUT</u> COMPETITION CARD)                   | _____ | \$ 65.00      |
| <input type="checkbox"/> ARAB ASSOCIATE INDIVIDUAL MEMBERSHIP (NO AHA MEMBERSHIP)<br>One Year   | _____ | \$ 15.00      |
| <input type="checkbox"/> ARAB YOUTH MEMBERSHIP (18 YEARS & UNDER, NO AHA)<br>One Year   | _____ | \$ 10.00      |
| <input type="checkbox"/> ARAB/AHA YOUTH COMPETITION MEMBERSHIP<br>One Year (INCLUDES AHA \$20. ARAB \$10 <u>and</u> COMPETITION CARD \$25.00)               | _____ | \$ 55.00 ***  |
| <input type="checkbox"/> ARAB/AHA YOUTH MEMBERSHIP<br>One Year (INCLUDES AHA \$20. ARAB \$10 <u>WITHOUT</u> COMPETITION CARD \$25.00)                       | _____ | \$ 30.00      |

\*\*\* AHA COMPETITION CARD IS REQUIRED TO COMPETE IN AHA ACTIVITIES

**INFORMATION NEEDED FOR AHA MEMBERSHIP**

Name: \_\_\_\_\_ Current AHA Number: \_\_\_\_\_

Birthday (For Youth Memberships): \_\_\_\_\_

**Please complete the following:**

Have you been refused membership to or suspended from any horse club? Yes ( ) No ( )

If so, why? \_\_\_\_\_ What Club? \_\_\_\_\_

We enjoy the following activities involving horses: \_\_\_\_\_

Return application with remittance to Membership Chairman listed above. Please make checks payable to ARAB of NWA.

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian's signature for youth member: \_\_\_\_\_