

**Oregon Quarter Horse Association, Inc.**

PO Box 537, Newberg, OR 97132  
(503) 537-9845



Ranch or Company Name: \_\_\_\_\_

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

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

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

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

Phone

(Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ Email: \_\_\_\_\_

**Hereby apply for membership in the Oregon Quarter Horse Association, Inc.**

**Check Type of Membership:**

**\$95.00 Family Membership** (two adults memberships & two votes) includes two youth enrolled in the youth division.

Youth Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Age: \_\_\_\_\_

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**\$55.00 Single Adult Membership** (one membership & one vote) One natural name only or ranch, company, corporation or syndicate. Partnerships require membership for each individual.

**\$45.00 OQHA Youth Division.** (OQHYA – 18 and under) No vote on OQHA matters. Age is determined by the age on January 1. Birth date: \_\_\_\_\_ Age: \_\_\_\_\_

**\*\*  \$20.00 Amateur Division Membership**

Amateur Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Age: \_\_\_\_\_

**\*\*Amateur membership is in addition to a family/single/joint OQHA membership. Points for any Amateur Division sponsored awards are tabulated only after OQHA membership and Amateur memberships are received. Amateur must complete 4 hours of volunteer service to be eligible for an Amateur Top 5 award.**

**\$25.00 Awards Declaration Fee (per horse)**

Horse Name: \_\_\_\_\_ Exhibitor: \_\_\_\_\_

Horse Name: \_\_\_\_\_ Exhibitor: \_\_\_\_\_

Memberships and award declaration fees must be paid by June 1st for points to be tabulated for year-end awards. Points toward year-end awards are tabulated only after membership is received. All owners and exhibitors must be members for points to count for year-end awards. Date of birth is required for all amateur members. Benefits of OQHA membership include: OQHA directory, email newsletter, reduced fee to Oregon Bred registration, year-end awards program, special offers from OQHA corporate sponsors.

By signing this application, I agree to abide by all of the Oregon Quarter Horse Association By-laws, rules and regulations. I acknowledge that horseback riding is a sport, which carries inherent risks of injury and damage to myself, others, horses and property. I knowingly assume all risks. Application is not valid unless signed. Parent or Guardian signature required for all Youth memberships.

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