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AHA 1205 (Rev. 03/23)

## MONTHLY SUMMARY SHEET FOR DUES

Date \_\_\_\_\_ Club Name \_\_\_\_\_ Club # \_\_\_\_\_  
(Required)

Treasurer/Membership Chairperson Name \_\_\_\_\_

Daytime Telephone # \_\_\_\_\_ Email \_\_\_\_\_

**MEMBERSHIP FEES**

\_\_\_\_\_ 1-Year Adult @ \$50.00 Each \$ \_\_\_\_\_

\_\_\_\_\_ 3-Year Adult @ \$135.00 Each \$ \_\_\_\_\_

\_\_\_\_\_ 1-Year Youth @ \$20.00 Each \$ \_\_\_\_\_

**COMPETITION CARDS**

\_\_\_\_\_ 1-Year Adult @ \$35.00 Each \$ \_\_\_\_\_

\_\_\_\_\_ 3-Year Adult @ \$105.00 Each \$ \_\_\_\_\_

\_\_\_\_\_ 1-Year Youth @ \$25.00 Each \$ \_\_\_\_\_

Foreign Residents Additional Fee (Outside of U.S. & Canada Additional Postage/Handling Fee)

\_\_\_\_\_ Adult @ \$30.00 Each \$ \_\_\_\_\_

\_\_\_\_\_ Youth @ \$30.00 Each \$ \_\_\_\_\_

(Add 5% GST for Canadian membership) TOTAL \$ \_\_\_\_\_

Total Memberships \_\_\_\_\_ Total Competition Cards \_\_\_\_\_

**NOTE:** Attach Monthly Report of Membership form.

<b>Method Of Payment</b> (US Funds Only)		
A required 3% Convenience Fee (calculated by AHA) will be added for electronic payments. A Convenience Fee charge does not apply if the customer submits payment by cash, check or money order. <input type="checkbox"/> Check (Payable to AHA) Check # _____ <input type="checkbox"/> Credit Card Total Amount Due \$ _____		
Credit Card#		\$
Print Name as it appears on CC		
Exp Date	CVV	Signature
Credit Card Billing Address (include zip)		