



ARABIAN HORSE ASSOCIATION

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ADULT
AHA MONTHLY REPORT OF MEMBERSHIP

Please list individual voting members only, in alphabetical order. Please print clearly and fill out report completely.

Club Memberships For (Club Name) Club Account # Date

Table with columns: Renewal, 3-Year, Modern Arabian Horse magazine, Competition Card, AHA Membership #, Member Name, New Address, Address, City, State, Zip, SS#, Birthdate, Home Phone, E-Mail, Work Phone, Fax. Includes a 'Check all that apply' header row.

Membership Chairperson's Name Address City
State/Prov. Zip/Postal Day Phone # Date Sent