



Association of Ridgecrest Arabian Breeders

AHA Club No. 2185

www.arabaha.org

Application for Membership

I hereby apply for membership in the Association of Ridgecrest Arabian Breeders (aka ARAB) and, if accepted, agree to abide by all bylaws and regulations of ARAB and the Arabian Horse Association.

NAME: _____ Tel: _____ e-mail: _____

ADDRESS: _____ City: _____ State/Zip: _____

Home Page URL (if you have a website) _____

BIRTH DATE: (Junior Members) _____

GUARDIAN SIGNATURE: (in case of a junior) _____ Date: _____

SIGNATURE: _____ Date: _____

AHA No. (if you already have one) _____

METHOD OF PAYMENT, please check one: Check Money Order PayPal

Other, describe _____

Send the above form with payment to:

ARAB, c/o Lorry Wagner, Membership Chair
8222 Athel Avenue
Inyokern, CA 93527

Tel: 760-377-5579

E-mail: lorrysda@gmail.com