



Free Associate Membership Application

First Time Buyer Only

Membership Year - October 1, 20____ to September 30, 20____

Name(s) _____

Farm Name _____

Address _____

City _____ State _____ ZIP _____

Phone # H (____) _____ Cell (____) _____

E-Mail Address _____

Children Names _____

(Children must be under 18 years of age to be included on parents application)

Membership Fee: (circle one)
 Individual \$15 Couple \$20 Family \$25

Update and include this information in the yearly membership directory and membership mailing list.

YES / NO
(CIRCLE ONE)

First time buyers are eligible for a free 1 year ASSOCIATE membership with Tennessee Valley Paso Fino Horse Association. The following restrictions apply:

- 1 - First time buyer must be sponsored by a current TVPFHA member in good standing with the region.
- 2 - Associate members are not eligible to vote until they convert their associate membership status by paying dues.
- 3 - To be eligible to vote, Associate members must convert their membership status at least 90 days prior to voting.
- 4 - ALL MEMBERSHIPS (dues paying and Associate memberships) EXPIRE ON SEPTEMBER 30 EACH YEAR.

CHECK		TVPFHA MEMBERSHIP QUESTIONNAIRE (Optional)	
Yes	No	Tennessee Valley's activities are based on the interests of its members; please answer all questions that apply.	
		This is a Tennessee Valley renewal membership	
Choose		I am or am not (circle one) a member of the National PFHA	PFHA # _____
		I am interested in trail rides.	
		I am interested in showing Paso Fions	
Fill-In		I would like to participate in Paso Fino promotions such as parades, riding, fun shows, breed demonstrations, and / or <i>(ideas are welcome)</i>	
		I would like to assist with the Tennessee Valley Paso Fino Horse Show	
		This is my first horse experience	
Fill-In		I own _____ (number) Paso Fino Horse (s). I am looking for _____ additional Paso Finos. Stallion _____ Colt _____ Mare _____ Filly _____ Gelding _____	
		I have Paso Finos for Sale	

FREE MEMBERSHIP

Sponsoring Members

Signature: _____

Declaration Statement: By signing below I affirm that this is my first Paso Fino horse.

Applicant Signature: _____ Date _____

Applicant Signature _____ Date _____

Please make checks payable to "TVPFHA" and Return to: Mary Beth Roland
 6844 Pull Tight Hill Road
 College Grove, TN 37046
 615-791-7128