



2023 Membership Application

Name: _____

APHA Membership Number _____

Street Address: _____

City, State, Zip: _____

Phone: _____ EMail: _____

Type of Membership (Circle, please):

Individual \$20.00

Youth \$10.00

Make checks payable to K.P.H.C. and
mail to: **Kentucky Paint Horse Club**
P. O. Box 1177
Versailles, KY 40383

Please note- KPHC is no longer offering Year End Awards due to offering one show per year.

Interested in helping KPHC? We always need volunteers! Please indicate your area(s) of interest by checking the blanks below.

___ Sponsorships ___ Newsletter/directory ___ Show planning ___ Awards

___ Leadership/Board of Directors (must be Kentucky resident) ___ show help

___ Other _____