



South Carolina Horsemen's Council
Membership Application
3090 Cedarvale Road
Rock Hill, SC 29732
803-327-2887

Email: schorsecouncil1@aol.com
Website: www.schorsecouncil.org

Date: _____

Name: _____ Company/Farm: _____

Address: _____ City: _____

State: _____ Zip: _____ County: _____

Phone: _____ Business phone: _____

Fax: _____ E-mail: _____

_____ Individual Membership \$20 (1 vote) _____ Family Membership \$30 (2 votes) _____ Farm Membership \$35 (3 votes)

_____ Youth Membership \$10 (no vote) _____ Commercial Membership \$55 (1 vote) _____ Assn. Membership \$35 (3 votes)

_____ Yes, please add our link to SCHC web page \$25—address to add _____

_____ Caps \$14 _____ Short Sleeve Shirt \$14 (S,M,L,XL) _____ Long Sleeve Shirt \$16 (S,M,L,XL) _____ Front Plate Tag \$2

Which Breed? _____

Are you interested in becoming a volunteer? _____ Yes _____ No If so, what area. _____

If you belong to other horse organizations, please give the name of the organization and current contact information for an officer.

Use back if necessary. _____



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