

**MQHYA
MANITOBA QUARTER HORSE YOUTH ASSOCIATION
2011-12 MEMBERSHIP \$10.00**

NAME: _____

ADDRESS: _____

CITY/PROVINCE/PC: _____

PHONE: _____ **FAX:** _____

EMAIL: _____

DATE OF BIRTH: _____

Manitoba Horse Council Membership #: _____

AQHYA Membership #: _____

MQHA Membership #: _____

(Note: in order to qualify for MQHA Youth All-Around High Point Awards, you must be a member of both MQHA and MQHYA).

Please be a volunteer and help your club. Would you like to serve on the MQHYA

board? Yes, (as) _____ **No** _____

Would you like to help with: (circle one)

Choice auctions* silent auctions*** sell 50/50 tickets**

Help with clinics* help create an MQHYA scrapbook**

Are you interested in the MQHA Recreational Riding Program: Yes No

Anything that you (we) can add or change to make MQHYA an even better club? _____

**PLEASE MAKE CHEQUE PAYABLE TO: MQHYA and mail form with payment to:
Karen Plett, Box 174, RR # 1, Steinbach, MB R5G 1L9**

For more information contact Karen at (204) 326-1420