

# 2010 Membership Form



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ ApHC Number: \_\_\_\_\_

E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

## Additional Family Members:

Spouse's Name: \_\_\_\_\_ ApHC # \_\_\_\_\_

Child's Name: \_\_\_\_\_ ApHC # \_\_\_\_\_

Child's Name: \_\_\_\_\_ ApHC # \_\_\_\_\_

Child's Name: \_\_\_\_\_ ApHC # \_\_\_\_\_

Child's Name: \_\_\_\_\_ ApHC # \_\_\_\_\_

<i>Family Membership (includes children 18 &amp; under)</i>	<b>\$25.00</b>
<i>Individual Membership</i>	<b>\$15.00</b>
<i>Youth Membership (18 &amp; under)</i>	<b>\$10.00</b>

Suggestions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would you like to be more active in the Free State club? \_\_\_\_\_ yes \_\_\_\_\_ no

If so, in what capacity -- serving on a committee \_\_\_\_\_  
assisting at shows \_\_\_\_\_  
other \_\_\_\_\_

Please do not post my membership in the Free State newsletter \_\_\_\_\_; or on Free State's website \_\_\_\_\_.

Return this completed form with your check made payable to Free State ApHC to:

Judye Miller  
P.O. Box 238  
Upper Falls, MD 21156  
(410) 598-7750  
[Judye3000@aol.com](mailto:Judye3000@aol.com)

*Free State ApHC will not be responsible for any checks, monies, or membership forms given to anyone other than the Free State ApHC Membership Chairperson.*