



# Humboldt Bay Horse Club

## Membership Form

*Date:*

*Primary Name:*

*Phone Number:*

*Additional Family Members included In Membership:*

*Address:*

*E-Mail Address:*

*Please check one type of membership*

*Family Membership \_\_\_\_\_ \$30.00*

*Individual Membership \_\_\_\_\_ \$20.00*

*Youth Membership \_\_\_\_\_ \$10.00*

*Business Membership \_\_\_\_\_ \$25.00*

***Please make checks out to: Humboldt Bay Horse Club***

*Mail to:*

*HBHC Membership  
56197 Highway 101  
Fortuna, CA 95540*

*For Office Use:*

*Date Received:* \_\_\_\_\_

*Amt. Received:* \_\_\_\_\_

*Check #* \_\_\_\_\_  *Cash*

*Received by:* \_\_\_\_\_