

MEMBERSHIP APPLICATION
B Bar S SADDLE CLUB
An affiliate of
WASHINGTON STATE HORSEMEN, INC

NAME_____

SPOUSE'S NAME_____

ADDRESS_____

CITY_____ZIP_____PHONE #_____

E-MAIL ADDRESS_____

ADDITIONAL FAMILY MEMBER NAMES:

_____	_____
_____	_____
_____	_____
_____	_____

DUES:	INDIVIDUAL	\$22.00
	FAMILY	\$31.00

Please make checks payable to: WASHINGTON STATE HORSEMEN, INC

Mail to: Jan Peterson
255796 Hwy 101 E
Port Angeles, WA 98362
360-457-5561