



**Keller Horse Owners Association
Application for Membership
P.O. Box 2393
Keller, Texas 76244-2393**

Information

Name: _____ Spouse: _____
Child: _____ Age: _____
Child: _____ Age: _____
Child: _____ Age: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Cell: _____
Email: _____
Signature: _____ Date: _____

Interests

I am interested in working or attending the following club activities:

- | | |
|--------------------------------------|---|
| <input type="checkbox"/> Western | <input type="checkbox"/> Natural Horsemanship |
| <input type="checkbox"/> Trail Rides | <input type="checkbox"/> English/Dressage |
| <input type="checkbox"/> Parades | <input type="checkbox"/> Other _____ |

Annual Membership Fees

Please include your check or money order with application:

- Individual - \$15.00 Family - \$25.00 Sponsor/Donor _____

For more information please call **817.907.0425** or visit our website at **www.kellerhorseowners.com**

