

# 2026 CLUB MEMBERSHIP FORM

SEND COMPLETED FORM ALONG WITH **ONE CHECK** FROM CLUB ACCOUNT TO:  
MEMBERSHIP CHAIR, JANET EDWARDS, PO BOX 295 – COLBERT WA 99005-0295

CLUB NAME: \_\_\_\_\_

ZONE: \_\_\_\_\_

CLUB SECRETARY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

## Membership Dues through a WSH-Recognized Club:



**\$24** INDIVIDUAL

**\$33** FAMILY\*

**\$15** YOUTH (When joining without any other family member)

\*Family membership is defined as any one or two adults acting as head(s) of household and children age 18 or younger or through 23 years of age and enrolled in a school of higher learning **living at the same address**. Membership for youth ages 19-23 must identify the school of higher learning that the student is attending. Impaired adults with adult caregivers of the same family are eligible for a family membership.

AMOUNT ENCLOSED: \_\_\_\_\_

CHECK NUMBER: \_\_\_\_\_

Ten percent (10%) of your WSH dues will be given to your choice of one of following major divisions (Horse Show, Trails and Pleasure, or Western Games). Which ONE major division would you like a portion of your dues to support? \_\_\_\_\_

### List "P" for Primary Member (if joining as a family).

Space is included for up to 3 children living in the Primary's household. If more than 3, repeat Primary's name in next set.

PRIMARY'S LAST NAME:		FIRST:	PHONE:	WSH #:
SPOUSE / PARTNER'S LAST NAME:		FIRST:	PHONE:	WSH #:
ADDRESS:		CITY / ST / ZIP:		
E-MAIL:				
CHILD'S NAME #1:	BIRTHDATE (If 23 and Under):	SCHOOL (Those 19-23):	WSH #:	
CHILD'S NAME #2:	BIRTHDATE (If 23 and Under):	SCHOOL (Those 19-23):	WSH #:	
CHILD'S NAME #3:	BIRTHDATE (If 23 and Under):	SCHOOL (Those 19-23):	WSH #:	

PRIMARY'S LAST NAME:		FIRST:	PHONE:	WSH #:
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ADDRESS:		CITY / ST / ZIP:		
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CHILD'S NAME #3:	BIRTHDATE (If 23 and Under):	SCHOOL (Those 19-23):	WSH #:	

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Club Secretaries – If members joining are individuals (either youth or adult, please utilize this page). Do NOT use for family memberships.

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