



2009 Membership Application

Check Your Status:

- Family \$12.00
- Individual \$10.00
- Youth \$8.00
- Associate \$8.00 (non-voting)
- Print My Info in the NMAA Directory**

Visit our website at www.nmaclub.com

Name _____ Phone(s) _____
Address _____ County _____
City _____ State _____ Zip _____
Email Address _____ Birthdate _____
Website _____

List all family members covered under Family Membership

Name _____ Age _____ Birthdate _____
Name _____ Age _____ Birthdate _____
Name _____ Age _____ Birthdate _____
Name _____ Age _____ Birthdate _____
Name _____ Age _____ Birthdate _____
Name _____ Age _____ Birthdate _____

By signing below, I assume full responsibility for accident, injury, and loss to myself, my family, and my horse(s) while participating in any Northern Michigan Arabian Association activity or event.

Signed _____ Date _____
(by voting adult member)

Printed Name _____

Please make checks payable to NMAA. Mail completed application and direct inquiries to:

Carol Kolnowski
1410 Herron Rd
Herron MI 49744
(989) 379-7900 ckol@i2k.com