



## AMERICAN DUTCH HARNESS HORSE ASSOCIATION

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OFFICE USE ONLY

Check #	
Amount	
Outstanding	
Date Rec.	

# MEMBERSHIP / SUBSCRIPTION

BUYER INFO

Name *(Please Print)* \_\_\_\_\_ ADHHA # *(if renewing)*

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Phone # \_\_\_\_\_

PAYMENT DETAILS

**APPLICATION TYPE**    **ANNUAL**    **FOUR YEAR**    **LIFETIME**

Membership **only** .....  \$100 .....  \$300 .....  \$1000

Magazine Subscription .....  \$45 per year *(must renew annually)*

All subscriptions go from January 1st to December 31st, regardless of what time of year you submit your form or become a member

**PAYMENT INFORMATION**    4% added for credit/debit

Check # \_\_\_\_\_     Card #

Exp. Date   /      CCV#        Zip Code         **TOTAL FEES** \$ \_\_\_\_\_

Name on Card \_\_\_\_\_    Signature \_\_\_\_\_