

Membership Application ___ New or ___ Renewing Member

- \$ 32.00 Annual Regular Membership** with subscription to Equine Journal. *Take \$5 Off*
- 250.00 Lifetime** –includes Spouse or Partner & first year’s subscription. *1 Free Registration*
- 25.00** without subscription if Member has a duplicate subscription *Take \$5 Off*
- 47.00** Canadian with subscription or **\$25** no subscription *Take \$5 Off*
- 67.00** Foreign with subscription or **\$25** no subscription *Take \$5 Off*
- 10.00** Youth One-Time Fee valid until Youth’s 18th. Birthday –no subscription



Name _____

Spouse or Partner (if included-no extra fee) _____

Youth’s Name and Birth date (if applicable) _____

Farm Name _____

Address _____

City _____ State _____ Zip _____ Country _____

Tel _____ Fax _____ email _____

Transfer Application -Simultaneous Horse Registration and Transfer to New Owner

_____ Membership Fees due with application: (if not a current member.) See Fees above.
 _____ Horse Registration Fee- see front of this sheet-Application for Miniature Horse Registration.
\$15.00 _____ **Transfer Fee**
 _____ **Total Fees enclosed**

New and renewing members fill in Membership Application above. Fees and requirements subject to change

TO BE COMPLETED BY NEW OWNER -(Membership Required-may be submitted with Transfer)

Name _____

Membership No. if known or assigned _____

Ranch/Farm Name _____

Address _____

City _____ State _____ Zip _____

Country _____ Tel _____ Fax _____

email _____

NEW OWNER S’SIGNATURE _____

TO BE COMPLETED BY SELLER date of transfer _____

SIGNATURE OF SELLER _____ **DATE** _____
 all owners need to sign and date unless ownership lists names as **Owner “&/ OR” —”OR” other owner’s name**

SERVICE CERTIFICATE -If animal being transferred is a bred mare)

Stallion’s Name _____ Reg. & No. _____

Breeding Periods from _____ to _____

Owner of Stallion _____ Signature _____

Total Amount \$ _____ ___Check/Money Order ___Visa ___Mastercard ___Discover Mo Yr. CW 2 Code

Acct. Exp.

Name on Card _____ Signature _____ Date _____

Mail is US Funds to:
 Canadians & Foreign Countries may write
 US beside Amount on personal checks.
 Form may be duplicate in its entirety.

WCMHR, INC.
12009 Stewartville Rd.
Vinton, VA 24179 USA

Tel/Fax: (540) 890-0856
www.wcmhr.com