2009 PtHA of NYS Membership Application
and
2009 PtHA of NYS Youth Club Membership Application

_____ **FAMILY** – $25.00 (1 vote) _____ **INDIVIDUAL** – 19 years and over - $20.00 (1 vote)

_____ **JUNIOR** - $10.00 (no vote) – Youth Member Name_____ Date of Birth _____
Jr. Membership and Youth Club Membership – for those 18 & under as of January 1, 2009

_____ **PtHA of NYS Youth Club Membership** – $10.00 per youth*****ANY YOUTH WHO IS WORKING TOWARD YOUTH CLUB OR MOTHER CLUB YOUTH YEAR-END HIGH POINTS AWARDS MUST BE A MEMBER OF THE PtHA of NYS EITHER AS A JUNIOR MEMBER OR BE INCLUDED IN A FAMILY MEMBERSHIP AND MUST ALSO BE A MEMBER OF THE PtHA of NYS YOUTH CLUB—PtHA of NYS Youth Club membership is a separate membership with separate dues.***

Youth Club Member _____DOB_____
Youth Club Member _____DOB_____

List all names to be included in a Family Membership (including birth dates of youth): **Family Membership includes** husband/wife and unmarried children 18 & under as of January 1, 2009, living at the same address and unmarried children 18 & under as of January 1, 2009, who are under the husband/wife's guardianship or custody living at the same address.

_____
_____
_____
_____

Make checks or money order (no cash) payable to "**PtHA of NYS**" (you may include Mother Club dues and Youth Club dues in one check) and send to:

Kathy McCullough, Membership Chairwoman
3860 East Genesee Street Road
Auburn, NY 13021

****Please DO NOT send or give your membership dues to anyone but the designated person listed above. ****

****Mother Club Dues and Youth Club Dues MUST BE PAID TO THE DESIGNATED PERSON LISTED ABOVE PRIOR TO THE START OF THE FIRST SHOW FOR WHICH YOU WANT POINTS TO COUNT*****

I HEREBY AGREE TO ABIDE BY THE BY-LAWS AND CONSTITUTION OF the PtHA of AMERICA AND the PtHA of NYS.

_____ _____
Signature Date

_____ _____
Signature Date

Name (please print) _____

Mailing Address_____

City _____State_____ Zip _____

Phone (_____)_____

e-mail address _____ You may include my e-mail address in the membership list that appears in the newsletter: ___yes; ___no

FOR OFFICE USE ONLY	**FOR OFFICE USE ONLY**
Mother Club Membership Received _____	**Youth Club** Membership Received _____
Paid: Check #_____ Cash _____	Paid: Check #_____ Cash _____
Acknowledged Membership _____	Acknowledged Membership _____
Revised 2009 PtHA of NYS Membership Application.doc (t-drive)	