



New Mexico Carriage Club Association, Inc.

**APPLICATION MEMBERSHIP**

Mail Check/MO to NMCA and mail to:

Vicki Warzeniak

P.O. Box 960

Peralta, NM 87042

505-869-4207

Email: [Vicki@mrworm.com](mailto:Vicki@mrworm.com)

Please join our NMCA Chat at <http://groups.yoshoo.com/group/NMCA>

\$15 for a Single Membership

\$20 per Household

\$50 Business for advertising

Birth month & Day \_\_\_\_\_

Anniversary month & Date \_\_\_\_\_

Please ***PRINT*** legible

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

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

CITY, ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

WEB SITE: \_\_\_\_\_

Do you drive, ride or both: \_\_\_\_\_

What Kind of horses do you have: \_\_\_\_\_

What kind of Vehicle do you drive: \_\_\_\_\_

Comments or Suggestions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Children:**

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

