

**Hollis Area Equestrians (HAE)
Application/Renewal Form
January 2017 thru December 2017**

_____ I am a new member _____ I am renewing my membership

_____ Individual \$20 _____ *Family \$30

Name: _____

Mailing Address: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____

Cell Phone: _____

E-Mail Address: _____

Signature: _____ Date: _____

Please complete and mail with your check to: HAE PO BOX 1252 Hollis, NH 03049

*Family Membership: List family members below. (names & ages) (only allowed two voting members)