

**BLUE RIDGE ARABIAN HORSE ASSOCIATION  
MEMBERSHIP 202 2026**

mail to: Bonnie Kessler, 714 Old Joppa Road, Joppa, MD 21085

[psfarm@comcast.net](mailto:psfarm@comcast.net)

Name \_\_\_\_\_ DOB \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Farm Name \_\_\_\_\_ If New Member Check Yes \_\_\_\_\_

**CHECK MEMBERSHIP DESIRED (PLEASE READ CAREFULLY)**

**VOTING AHA/BRAHA MEMBERSHIP:** *vote on club matters, hold club offices including AHA delegate - DOES NOT include competition card with excess personal liability insurance.*

**\*THIS MEMEBERSHIP TYPE CAN BE DONE ON LINE - WWW.ARABIANHORSES.ORG**

**FEES**

___ ADULT (individual-one year)	On Line
___ ADULT (individual-three year)	On Line
___ YOUTH (NON voting) (18 years or younger as of Dec 1 of previous year)	On Line

**\*\*COMPETITION CARD\*\*** *Add to your membership fees if you compete in or officiate at AHA recognized events (included in this fee is the excess personal liability insurance for US residents)*

**\*THIS MEMEBERSHIP TYPE CAN BE DONE ON LINE - WWW.ARABIANHORSES.ORG**

___ ADULT (with club affiliation one year)	On Line
___ ADULT (with club affiliation three year)	On Line
___ YOUTH (one year)	On Line

**BRAHA MEMBERSHIP (NON VOTING)** *invited to all BRAHA functions, may enroll in Maryland Futurity and High Point Program*

___ INDIVIDUAL (ONE YEAR-non AHA)	\$20.00
___ FAMILY (ONE YEAR-non AHA)	\$25.00
___ YOUTH (ONE YEAR-non AHA, 18 yrs & younger)	\$10.00
___ SENIOR INACTIVE (ONE YEAR-non AHA)	\$15.00

Please make check payable to BRAHA      TOTAL AMOUNT \$ \_\_\_\_\_

List each member with DOB for Youth

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____