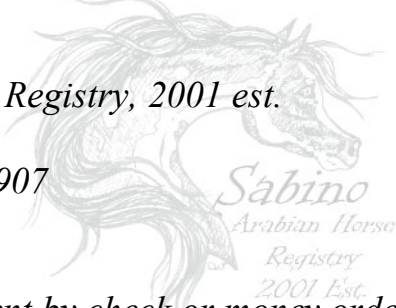


Membership Application

Send application to:
Sabino Arabian Horse Registry, 2001 est.
P.O. Box 1907
Bemidji, MN 56619-1907



SAHR Use only:	
Membership #	_____
Registrations on file:	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Please include payment by check or money order (U.S. funds), payable to Sabino Arabian Horse Registry. Payment by credit card can be made via PayPal.com to info@sabinoarabianhorseregistry.com*

Name _____

Name _____

Name _____

Name _____

Farm Name _____

Farm Website _____

Mailing Address _____

Country _____

Phone _____

Comments _____

Email Address _____

Yes! I would like to receive email updates via email.

Membership Type: Check here if this is renewal membership

Associate \$15/yr

Youth \$10/yr

Family \$40/yr

Lifetime \$200 one time fee