



American Ranch Horse Association

2018 CHARTER RENEWAL FORM

Must be filed by to January 31. (Please forward to new Charter President, if applicable)

A \$50 fine will apply for any charter that has not returned their application by January 31st.

*All Charter Officer, Board Of Directors and voting members must be current ARHA Members by deadline.

*Must include a copy of the minutes from the Charter's General Membership Meeting where officers were elected.

*****NEW for 2018!!! ALL EMAIL CORRESPONDENCE FROM ARHA OFFICE WILL BE SENT TO CHARTER REPRESENTATIVE**

Name of Charter: _____

Region #: _____ Area Served : _____

Charter Website address: _____ Charter Email: _____

CHARTER OFFICERS (must be current ARHA member by January 31, 2018) The Charter President's contact information is published in ARHA printed materials and/or on ARHA website. Please mark the information you DO NOT want published. ***** New for 2018!!!! Each charter will elect a Charter Representative, this person can be an Officer or Board Member. It is their responsibility, and will be held accountable to communicate and share any information or news emailed to them from the ARHA Office to ALL their charter officers, board members and membership. Choose this person wisely!******

*****Charter Representative:** _____ Membership ID No: _____

E-mail: _____ Phone No. _____

President: _____ Membership ID No: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

E-mail: _____ Phone No. _____

Vice President: _____ Membership ID No: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

E-mail: _____ Phone No. _____

Secretary: _____ Membership ID No: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

E-mail: _____ Phone No. _____

Treasurer: _____ Membership ID No: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

E-mail: _____ Phone No. _____

Youth Advisor: _____ Membership ID No: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

E-mail: _____ Phone No. _____

Amateur Advisor: _____ Membership ID No: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

E-mail: _____ Phone No. _____

CHARTER BOARD OF DIRECTORS/ADVISORY BOARD *(must be current ARHA member by January 31, 2018)*

Director: _____ Membership ID No: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

Director: _____ Membership ID No: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

Director: _____ Membership ID No: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

Director: _____ Membership ID No: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

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City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

Director: _____ Membership ID No: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

Director: _____ Membership ID No: _____
Address: _____
City: _____ State: _____ Zip: _____ Country: _____
E-mail: _____ Phone No. _____

CHARTER NEWSLETTER Yes No

Name of Charter Newsletter: _____

How Often: _____ Dates Published: _____

Where do you post it at? _____

Editor: _____ Phone No _____

E-mail: _____

CHARTER INFORMATION

****Email us a copy of your Charter Logo by 1/31/2018. We need it in high resolution/300dpi J-Peg format.**

****Include a copy of your Charter By-Laws (Must include or your Charter Renewal is not considered completed)**

Approximate number of Charter members? _____

Charter membership fees: _____ :Youth _____ :Amateur _____ :Family _____ :Individual _____

How often does your Charter meet? _____ Are meeting open to your members: Yes No

Do you have a show Committee: Please list names: _____

When do you hold your elections? _____ Year End Banquet date: _____

Approximate number of shows per year? _____

2018 Show Dates/ Location: _____

Do you offer Non-ARHA Classes: Yes No If yes, please list: _____

Face Book Page address: _____

***** A Charter must sponsor a minimum of two (2) ARHA Approved events each year *****

PLEASE NOTE: In order to assure that correct person receives information from ARHA Office, please notify ARHA of any changes to your Charter's Officers during the year. These changes must be submitted in writing by a charter officer.

Who is authorized to sign Show Approval Applications: (limit two)

Name No. 1: _____

Title: _____

Signature: _____

Name No. 2: _____

Title: _____

Signature: _____

**HERE'S TO ANOTHER GREAT YEAR!
THANK-YOU CHARTERS FOR ALL THE HARD WORK & DEDICATION.**

**IF YOUR CHARTER HAS ANY SUGGESTIONS, IDEAS, COMPLAINTS OR ISSUES...
WE WANT TO HEAR FROM YOU!!!**