

American Harlequin Rabbit Club Membership Application Form

Please Check one: New Membership _____ Renewal _____ Canadian/Foreign _____
Dues: ADULT \$5.00 YOUTH* \$4.00 COUPLE \$7.00 Family (all residing at same address) \$10.00

Last Name: _____ **First Name:** _____

Spouse Name _____ ***Single Youth** _____

Address _____

City/State _____ **Zip Code:** _____

Phone # _____ ***Youth DOB** _____

E-Mail Address: _____

***All Youth's date of birth required**

Please use back of form for additional member information.

Send payment, made payable to American Harlequin Rabbit Club (AHRC), and completed form to:
Thomas Green, AHRC
638 Phin Croft Rd
Marion, KY 42064