



Northern California Walking Horse Association

Membership Application - 2026

The Northern California Walking Horse Association is a group dedicated to building a Pleasure Walking Horse Community in Northern California through promotion of the Tennessee Walking Horse.

MEMBER INFORMATION: (please print legibly)

NAME: _____

ADDRESS: _____

CITY: _____

STATE: _____ ZIP: _____

PHONE: _____

EMAIL: _____

ABOUT NCWHA:

This club was organized for all individuals who support the Pleasure Tennessee Walking Horse and are willing to work together to share this wonderful breed and have fun while doing it.

Club activities and events can include those listed below. Helping does not always require a huge time commitment. Please note your areas of interest, we might ask you to lend a hand if needed.

| | |
|--|---------------------------------------|
| <input type="checkbox"/> Breed promotion | <input type="checkbox"/> HPA |
| <input type="checkbox"/> Clinics | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Expo | <input type="checkbox"/> Newsletter |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Trail rides |
| <input type="checkbox"/> Governance | <input type="checkbox"/> Youth |
| <input type="checkbox"/> Horse shows | <input type="checkbox"/> Other: _____ |

Suggestions for the club: _____

Please complete, sign, and return with your payment:

NCWHA Membership c/o Shayna Shaw
13512 Alta Mesa Rd
Galt, CA 95632 (Checks payable to NCWHA)

By signing below, I hereby agree to abide by and support the by-laws, rules, and regulations of NCWHA found on our website at www.ncwha.com.

Signature of Applicant:

Date: _____

TYPES OF MEMBERSHIP: (please check one)

YEARLY MEMBERSHIP EXPIRES 12/31

| | |
|--|------|
| <input type="checkbox"/> INDIVIDUAL (18 and older) | \$45 |
| <input type="checkbox"/> FAMILY (includes children under 18) | \$55 |
| <input type="checkbox"/> YOUTH (17 years and under) | \$20 |

LIFETIME MEMBERSHIP

| | |
|---|-------|
| <input type="checkbox"/> INDIVIDUAL LIFETIME (18 and older) | \$150 |
| <input type="checkbox"/> FAMILY LIFETIME (includes children under 18) | \$200 |

FAMILY MEMBERSHIP INFORMATION:

Spouse or significant other

Name: _____

Children under 18

Name: _____

Date of birth: _____

Name: _____

Date of birth: _____

EQUINE RELATED BUSINESS ADVERTISING:

If you would like your equine-related business listed on our website or a link at no additional charge, please complete below.

Business name: _____

Address: _____

City: _____

State: _____ Zip: _____

Phone: _____

Web address: _____

Email: _____

Brief description: _____
