

## DIRECTIONS FOR COMPLETING INTERNATIONAL AFFILIATE REPORT

1. This document is to be compiled and signed by the President or Secretary.
2. This document and the complete membership list must be received **in the ApHC office** on or before **February 15**. Information may be mailed or faxed.
3. Complete each section in its' entirety.
4. Please print legibly or type all information except signatures.

**Failure to return this yearly document may result in loss of affiliation after notice and hearing.**

Please keep a copy of this document for your records.

### RETURN TO:

**APPALOOSA HORSE CLUB  
INTERNATIONAL AFFILIATE COORDINATOR  
PO BOX 82519  
OKLAHOMA CITY, OK 73148  
FAX (208) 882-8150**

#### CHECKLIST:

For your convenience, please check off below as the items are completed, to ensure that you have included all the necessary information.

- List of Officers, Directors & Contact Person
- Signature of President or Secretary
- Complete membership list including names, addresses and ApHC membership numbers where applicable.

#### President's or Secretary's Signature

This document must be signed by your President or Secretary before submitting to the ApHC office. Documents submitted without this signature will not be accepted as complete. A space has been provided below for your President or Secretary to sign.

Printed Name

Office Held

Signature

**By signing this document, I attest the information to be true to the best of my knowledge.**

## International Affiliate Officers

\_\_\_\_\_  
Name of Club or Association

\_\_\_\_\_  
Principle Contact Person

\_\_\_\_\_  
ApHC #

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Fax Number (If Available)

\_\_\_\_\_  
E-Mail Address (If Available)

**Please note: All correspondence from the ApHC will be sent to the contact person. The ApHC will publish the contact person's address and phone number in all International Affiliate Listings.**

### Officers

\_\_\_\_\_  
President or Executive Secretary

\_\_\_\_\_  
ApHC#

\_\_\_\_\_  
Vice-President

\_\_\_\_\_  
ApHC#

\_\_\_\_\_  
Secretary

\_\_\_\_\_  
ApHC#

\_\_\_\_\_  
Treasurer

\_\_\_\_\_  
ApHC#

\_\_\_\_\_  
Director or Committee Member

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ApHC #

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Director or Committee Member

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Director or Committee Member

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