2024 SOUTHERN OHIO QUARTER PONY ASSOCIATION MEMBERSHIP FORM

Name _____

Address _____

_____

Phone # _____

E-mail _____

Membership Type :

Individual _____$10.00 Family _____ $25.00

Please return form to: SOQPA c/o Sam Eismon
9909 Township 210 NE
New Lexington, OH 43764

Member Names (if family membership) and year of birth for those 18 and under: