Cana	dian Belgian Hor	se Association
	<b>IEMBER</b>	<b></b>
	Belgian Horse Association Receive The Canadian B	s) : \$200.00
Fees are d	ue January 1st of each year and a	re for the calendar year only.
New Memb	er? No 🔄 Yes 🗔	Current Membership #:
Name:		
Address:		
Town:	Province:	Postal Code:
		Phone #:
		prrespondence quicker and more efficient.
Check here if you do not	want your name and address post	ted on the internet:
	for membership in the Canadian Bel nform to the Constitution and By-La	gian Horse Association and do hereby agree aws of the Association.
Signature:		Current Date:
Cheque payable and ma Canadian Belgian Horse	ll to: Association, 17150 Concession 10	, Schomberg, ON L0G 1T0
I have included my cheq	ue in the amount of:	
Or, please charge to my	/isa Account #:	
Expiry Date:	SC (#on back):	Amount \$:
Name on Card:		
	Any questions, please contact Ph: 905-939-1186 email: cbha@csolve	the CBHA at: 6;