



# Back Country Horsemen Michigan Pigeon River and Beyond

A 501©3 Non-Profit Organization

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## Membership Application

A Membership in BCHM PR&B includes a membership in Back Country Horsemen of America

Please Answer all Questions and Print Clearly. THANK YOU!

If you are a member of Back Country Horsemen of America within another state, provide the name of the state & chapter.

\_\_\_\_\_

Membership is from January 1 through December 31. Annual Meeting & Elections February of each year.

- \$30 Single   
 \$ 40 Family   
 New Membership   
 Renewal

Please include names of all family members if applying for family. Single members must be over 18 years old.  
Member Contact Information:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Do you wish to receive newsletters and other correspondence by  e-mail? or  US Mail?

### Family Members:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

I wish to make an *additional* contribution to BCHM – PR&B’s important work in the amount indicated:

\$ \_\_\_\_\_ to the Educational Fund - \$ \_\_\_\_\_ to the General Operating Fund

I am interested in participating on a committee. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_ Total \$ Enclosed: \_\_\_\_\_

Please mail completed form along with fee to:  
Back Country Horsemen Michigan – Pigeon River and Beyond  
Jill Oomen Secretary  
5182 N. 136th Avenue  
Hart, MI 49420  
[Email Jill](#)

To stay up-to-date go to  
[www.BCHMI.org](http://www.BCHMI.org)



Backcountry Horsemen~ Pigeon River & Beyond, MI  
We are a state chapter of Back Country Horsemen of America

<b>FOR OFFICIAL USE ONLY</b>
Date: _____
Ck No: _____
Cash: _____
Amt. Collected: _____
Your Initials: _____