



# Membership Application

Pony Of the Americas Club, Inc. 3828 S. Emerson Ave. Indianapolis, IN 46203 317-788-0107  
Fax: 317-788-8974 www.poac.org

Name \_\_\_\_\_ Date Of Birth \_\_\_\_\_ Sex \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: Days \_\_\_\_\_ Evenings \_\_\_\_\_ Email \_\_\_\_\_

Family Members: (Please list ALL adult and youth family members under this membership, including full name, birth date and sex).  
\*\* Family Members are defined as Spouse and your children 18 and Under (as of Jan 1) Only.

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Welcome to the POAC, National Membership in Pony Of the Americas Club, Inc. is a prerequisite for conducting business, with the exception of Transfer of Ownership. Membership entitles you and your immediate family to voting privileges, nomination and election of members to the National Board of Directors, eligibility for National Year-End Awards, and participation in POAC Regional, Classic or World Shows, National Congress, and International Futurity events. **For voting privileges , membership must be post marked by April 15 of the current year.** All POA State and National Officers , members of State and National POA Boards Of Directors, POAC Approved Judges, State and National Inspectors, Show Chairmen, and POAC liaison people working with Specialty shows, National Committee Chairmen must be current POAC National Members.

To apply for membership, complete this application and sign below. Send this form with appropriate fees to the POAC National Office. If you have questions, contact the POAC by phone at 317-788-0107. Refer to the POAC National website at www.poac.org for complete information on membership and POA Programs. POAC reserves the right to change fees at any time.

**POAC Membership:** 1 Year End Magazine Included.....\$60 US /\$100 outside US  
( required to process any paperwork, voting rights, national points, year-end awards & to show at the following shows: Regional, International, Congress, World-type or National Futurities)

**POAC Junior Membership:** .....\$35  
(Only for a youth showing a POA owned by another family with current membership, at the Regional, International , Classic, World-type or Futurities)

POAC National Membership includes one copy of the Current Official POAC Handbook.

I hereby agree to abide by the rules and regulations of POAC, Inc. as listed in the current Official POAC Handbook: and I ascribe to the goals and purposes of the POAC, as detailed in the Official Handbook.

Signature \_\_\_\_\_

|                             |       |                 |                       |                 |          |
|-----------------------------|-------|-----------------|-----------------------|-----------------|----------|
| Payment: (Circle One)       | Check | Visa            | MasterCard            | AmericanExpress | Discover |
| Card Number: _____          |       | Exp Date: _____ |                       | CV2# _____      |          |
| Name on Card: _____         |       |                 |                       |                 |          |
| Billing Address: _____      |       |                 | City/State/Zip: _____ |                 |          |
| Authorized Signature: _____ |       |                 |                       |                 |          |