

NorthWest Montana Back Country Horsemen Membership Application

Dues are \$45 per year (January- December) for a family OR \$35 for a single membership.

Name: _____ Date _____

Spouse: _____

Children: _____

Mailing Address: _____

City/State/Zip: _____

Telephone: _____ Spouse Phone: _____

Email: _____ Spouse Email: _____

Emergency Contact (someone who wouldn't normally be with you on a BCH project or ride):

Name _____ Phone _____

Primary Chapter \$45 **Family** (# in family _____) Primary Chapter \$35 **Single** _____

Secondary Chapter \$15.00 **Family** (# in family _____) Secondary Chapter \$15.00 **Single** _____

**** Family memberships are one household with two adults and children under 21

New Member _____ Renewal _____

Junior Member _____ Parent Signature: _____

Local, State and National BCH newsletters Please indicate your delivery preference:

Mail _____ Email _____

Please complete the application and mail it with check to:

NWMTBCH

PO Box 23, Kalispell, MT 59903

nwmtbch.org

Facebook: [NorthWestMontanaBCH](#)

secretary@nwmtbch.org