



**All Pro Canadian
Chuckwagon & Chariot Association**
Email: secretary@allprochuckwagon.com
Website: www.allprochuckwagon.com



MEMBERSHIP FORM

Name: _____

Address: _____

Postal Code: _____

Phone Number: _____

Email: _____

Year: _____

I hereby request that my application be accepted into the All-Pro Canadian Chuckwagon & Chariot Association. I fully understand that my application will be reviewed and I agree to the following conditions:

1. Payment of annual fee must accompany my application
2. There will be a minimum probation period of 1 year or more
3. I may attend meetings but will not have voting privileges while on probation
4. After maintaining a one-year membership and providing I am not on probation, I may apply for voting status
5. I will have my horses measured by the APCC&CA
6. I will follow the rules, regulations and promote the association in a professional manner for the betterment of all and the sport

Numbers of Years Driving: _____

Name of other Associations Joined: _____



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Date: _____

Signature: _____

Membership Payment: Paid Cash _____ Paid Cheque _____
(check one)

Family members are invited and encouraged to join, but must submit an application individually

Received By: _____
(APCC&CA Executive Name & Title)