





**California State Horsemen's Association, Incorporated**  
 1330 W. Robinhood Dr. Suite D, Stockton, CA 95207  
 PHONE: 209-227-7110 Fax 888-389-0359

### Family Members

Member	First Name	Last Name	Gender	Relationship*	DOB
Primary Adult					
Second Adult					
Child/Grandchild					
Child/Grandchild					
Child/Grandchild					
Child/Grandchild					
Child/Grandchild					
Child/Grandchild					
Child/Grandchild					
Child/Grandchild					

\* Relationship to Primary Adult

**Family Membership Qualifications:**

Two or more persons who meet one of the following qualifications may apply for a family membership:

- a) Any two persons of the same household and/or their children who are juniors.
- b) Any two persons who reside in the same household;
- c) Any adult and his/her children/grandchildren who are juniors.  
 The adult must be the parent or legal guardian of the children/grandchildren.