



## 2018 Annual Notification of Affiliate Palomino Association

### --- YOUTH OFFICERS ---

**Name of APA:** \_\_\_\_\_  
\_\_\_\_\_ (Check if appropriate) This APA is now inactive

Each APA shall report the results of APA officer, national director, alternate national director and inspector elections to PHBA prior to **December 20**. APA which does not meet the deadline shall be assessed a **\$75 fine after December 20**. An additional \$75 will be assessed for each thirty day period.

**PRESIDENT NAME:** \_\_\_\_\_ PHBA ID #: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ WORK #: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL # ( ) \_\_\_\_\_ - \_\_\_\_\_  
FAX #: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

**PRESIDENT-ELECT:** \_\_\_\_\_ PHBA ID #: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ WORK #: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL # ( ) \_\_\_\_\_ - \_\_\_\_\_  
FAX #: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

**VICE PRESIDENT:** \_\_\_\_\_ PHBA ID #: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ WORK #: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL # ( ) \_\_\_\_\_ - \_\_\_\_\_  
FAX #: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

**VICE PRESIDENT:** \_\_\_\_\_ PHBA ID #: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ WORK #: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL # ( ) \_\_\_\_\_ - \_\_\_\_\_  
FAX #: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

**SECRETARY:** \_\_\_\_\_ PHBA ID #: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ WORK #: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL # ( ) \_\_\_\_\_ - \_\_\_\_\_  
FAX #: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

**ADULT LEADER FOR YOUTH:** \_\_\_\_\_ PHBA ID #: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
HOME PHONE: ( ) \_\_\_\_\_ - \_\_\_\_\_ WORK #: ( ) \_\_\_\_\_ - \_\_\_\_\_ CELL # ( ) \_\_\_\_\_ - \_\_\_\_\_  
FAX #: ( ) \_\_\_\_\_ - \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_ WEBSITE: \_\_\_\_\_