



KWHA Scholarship Program

Supporting the educational goals of KWHA's outstanding youth!

Donor's Name: _____

Address: _____

City/State/Zip: _____

Phone number: _____

Scholarship Donation Amount Enclosed: \$ _____

***THANK YOU FOR YOUR SUPPORT OF THE
Kansas Western Horseman's Association Youth Membership***

Please send this form with check made payable to KWHA to:

KWHA State Treasure
c/o Norleen Knoll
1716 230th Ave
Hays, KS 67601