



**NATIONAL REINING HORSE ASSOCIATION**

2010 YOUTH  
MEMBERSHIP APPLICATION  
EXPIRES DECEMBER 31<sup>ST</sup>!

FOR OFFICE USE ONLY

- New Member
- Renewal ID# \_\_\_\_\_  
(if you have ever been an NRHA member)
- I am Head of Household
- Address Change
- I am no longer a Non Pro as of \_\_\_\_\_
- Please mail current *NRHA Handbook* with my member card
- Please do not submit my name to Corporate Partners
- YES, I want to invest in the future of Reining!**  
Enclosed is \$25 \$50 \$100 Other \_\_\_\_\_ for the Reining Horse Sports Foundation.

**PLEASE NOTE:** If you plan to ride in **Non Pro** or **Rookie** classes and did not have Non Pro status the previous calendar year, you **must** complete and sign the **Non Pro Declaration** and submit it with the filing fee. (Form can be found at [nrha.com](http://nrha.com))

**2010 General or General Non Pro members must complete General membership application. (Form can be found at [nrha.com](http://nrha.com) )**

**2010 Associate or Associate Non Pro members must complete Associate membership application. (Form can be found at [nrha.com](http://nrha.com) )**



**MEMBERSHIP** (please choose one)

- \$35 Youth membership dues
- \$35 Youth Non Pro Renewal membership dues
- \$2,000 Life or Life Non Pro membership dues (Individual only) **CHECK or MONEY ORDER ONLY**

Contributions or gifts to the NRHA are not deductible as charitable contributions for federal income tax purposes. However, membership dues may be deductible by members as an ordinary and necessary business expense.

**Payable only in US Funds or by Visa, MasterCard, Discover or American Express.**

**NRHA REINER MAGAZINE for members** (please choose one)

YOUTH MEMBERSHIP INCLUDES THE ELECTRONIC REINER MAGAZINE – Email address required

- \$25 U.S. 3<sup>rd</sup> Class Postage
- \$55 U.S. 1<sup>st</sup> Class Postage
- \$50 Canada Postage
- \$85 International Postage

**Make checks payable to:**

**NATIONAL REINING HORSE ASSOCIATION**  
3000 NW 10<sup>TH</sup> STREET  
OKLAHOMA CITY, OK 73107-5302  
405-946-7400  
405-946-8425 FAX  
[nrha.com](http://nrha.com)

**PLEASE PRINT OR TYPE CLEARLY**

Date of Birth \_\_\_\_\_

Last Name (Surname) \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Country \_\_\_\_\_ Postal Code \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ Day Phone \_\_\_\_\_

Evening Telephone \_\_\_\_\_ Fax Number \_\_\_\_\_

Email address \_\_\_\_\_ Parent/Guardian Name: \_\_\_\_\_

**PAYMENT:**  Check or money order (in U.S. funds)  Visa  Master Card  Discover  American Express

Card #     -     -     -

3 or 4 digit CSV #:     Expiration Date:   /   Cardholder's Phone : \_\_\_\_\_

Cardholder Name (please print) \_\_\_\_\_ Cardholder Signature: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Rec'd: \_\_\_\_\_ Amt Pd: \_\_\_\_\_ Ck#: \_\_\_\_\_

Date Ent'd: \_\_\_\_\_ Ship Date: \_\_\_\_\_

Revised 7/22/10