

EPRHA
Eastern Plains Reining Horse Association--NRHA AFFILIATE

Annual Membership Application
Family \$30, Individual \$20, Youth \$10

Year ends 12-31-2010

Check One:

Family: _____ Individual: _____ Youth: _____

Name: _____

Address: _____

City _____ State _____ Zip _____

Phone: _____ NRHA # (if applicable) _____

Email: _____

EPRHA offers family memberships to members of the immediate family living in the same household. All age groups are defined by NRHA guidelines. EPRHA reserves the right to reject the membership of individuals who are suspended from the NRHA for any reason, subject to being reinstated by the NRHA. See bylaws.

Youth members 18 and under must have a parent or guardian sign below:

*Parent or guardian
signature:* _____

Enclose the appropriate fee and Mail to:

**EASTERN PLAINS REINING HORSE ASSOCIATION
P.O. BOX 164
PEYTON, COLORADO 80831**

If you have questions please call Rocky at: 719-749-0345
You may also email me at: Homeontheprarie@aol.com

