



The Yankee Reining Horse Association

Membership Form 2016

Please note: Owner & Rider must be members to qualify for Year End Awards.

Name: _____

NRHA Number: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

_____ \$35 Membership: will qualify for year-end awards
Save \$10.00 by paying your membership by January 16th, 2016

_____ \$45 Membership: will qualify for year-end awards
For membership received after January 16th, 2016

_____ Free Youth Membership: applies when riding in youth class only. If youth chooses to compete in other classes for year-end awards they must purchase a rider membership.

Credit Cards Accepted.

Card Number: _____ Security Code: _____

Expiration Date: ____/____ Billing Zipcode: _____

Please Make Checks Payable to : YRHA

Mail to:

YRHA MEMBERSHIP
c/o Bobbi Mancuso
5033 Mapleton Rd
Lockport, NY 14094