



# New York Reined Cow Horse Association 2019 Membership Application

Membership valid for 2019

Name (First, MI, Last): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Text: Yes/No Email: \_\_\_\_\_

\_\_\_\_\_ New Membership \_\_\_\_\_ Renewal (NYRCHA #) \_\_\_\_\_

NRCHA # (if applicable) \_\_\_\_\_

\_\_\_\_\_ Individual \$35

\_\_\_\_\_ Family \$50

\_\_\_\_\_ Individual Lifetime \$300

\_\_\_\_\_ Family Lifetime \$500

Member information to be included under family memberships

NRCHA #	Name	DOB Children	#NRCHA if applicable

Make Checks payable to New York RCHA  
Mailing Address: Lesa Didas, 206 Main Street, Hornell, NY 14843  
Contact: Lesa Didas, Treasurer: (607) 661-4514 / ldidas2004@yahoo.com