CASHA MEMBERSHIP APPLICATION

Year of Membership _____

MEMBERSHIP RULES

- Owner AND exhibitor must belong to CASHA for High Point Award and Merit points to count. If a horse is jointly owned, at least one owner must be a member (preferably active exhibitor).
- If horse is owned by a company, trust, LLC, or any other type of business entity, the entity must be a member of CASHA for High Point Award and Merit points to count.
- Family membership only includes children 17 and under and spouse (does not include other relatives).
- If a membership is in a stable name, only the owners (married couple and children 17 and under) are members. Stable employees must join separately for points to count.
- Points are counted from the date membership form, nominations, and money are received by CASHA
- Membership expires each year at the CASHA banquet
- POINTS ARE NOT RETROACTIVE

MEMBER INFORMATION	
Name:	
Junior Exhibitor(s) Show Age for Membership Year:	
Address:	
City:	State: Zip:
Home Phone:() Work Phone:()	Cell Phone :()
Signature: E-Mail	:
By signing above, I understand and grant permission to CASHA to create, recreate, copy, reproduce, exhibit, publish, distribute photos, or take photographic or film records of myself and/or my family to use for promotional and/or commercial purposes without any remuneration to me and/or my family. I hereby assign all right,	
title, and interest I may have in or to any and all media in which my name or likeness n Trainer's Name	
Trainer's Name	_
New Member (Check Box) – Person Who Referred You	
ASHA Membership #	USEF Membership #
CATEGORY OF CASHA MEMBERSHIP (Select One)	
Family Membership Adult, spouse, and all children 17 and under. All nominated for High Point Awards. Family Names to be Included in Membership:	horses owned by a family member are automatically
Individual/Business Membership One adult, child, or business membership. All hor nominated for High Point Awards.	
Academy Membership Does not include horse nominations and only appl	\$25 ies to Academy Classes and Academy Year End Awards
COMMITTEES AND INTERESTS	
YES! Please Contact Me to Participate on the CASHA Board and/or Committees (Check Box)	
PAYMENT INFORMATION (Select One)	
Check Enclosed (Made Payable to CASHA)	Check Number (Office Use ONLY)

Mail Application & Payment (Payable to CASHA) to: