



2012 GENERAL MEMBERSHIP APPLICATION EXPIRES DECEMBER 31<sup>ST</sup>!

FOR OFFICE USE ONLY

- checkbox New Member\*\*
checkbox Renewal ID#
checkbox I am Head of Household
checkbox Please mail current NRHA Handbook with my member card
checkbox Please do not submit my name to Corporate Partners
checkbox 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)

RUSH SERVICES: NRHA membership cards will be mailed within two weeks of the date received by the office. NRHA offers Rush services which include an official confirmation being emailed or faxed to be used until the original membership card is received by mail.

To request a RUSH, please check one box below and provide email or fax number where confirmation should be sent:

- MEMBERSHIP\*\* (please choose one)
checkbox \$95 General membership dues
checkbox \$75 Upgrade Current Associate Membership
checkbox \$270 3 Year General membership dues
checkbox \$2,000 Life membership dues (Individual only)
CHECK or MONEY ORDER ONLY

- checkbox 3 Day Rush - \$30 Send to:
checkbox Same Day Rush - \$50 Send to:

NRHA REINER MAGAZINE for members (please choose one)

- checkbox Free Digital Reiner available at nrha.com For Reiner magazine in Print
checkbox Free U.S. 3rd Class Postage (one per address)
checkbox \$55 U.S. 1st Class Postage
checkbox \$50 Canada Postage
checkbox \$85 International Postage

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

Make checks payable to:

NATIONAL REINING HORSE ASSOCIATION
3000 NW 10TH STREET
OKLAHOMA CITY, OK 73107-5302
405-946-7400
405-946-8425 FAX
nrha.com

PLEASE PRINT OR TYPE CLEARLY

Date of Birth (Required for Prime Time Riders)

Last Name (Surname) First Name MI
Street Address
City, State, Country Postal Code
Country of Citizenship Day Phone
Evening Telephone Cell Number
Email address Fax Number

PAYMENT: checkbox Check or money order (in U.S. funds) checkbox Visa checkbox MasterCard checkbox Discover checkbox American Express

Card # [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ] - [ ] [ ] [ ] [ ]

3 or 4 digit CSV #: [ ] [ ] [ ] [ ] Expiration Date: [ ] [ ] / [ ] [ ] Cardholder's Phone: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

Cardholder Name (please print) Cardholder Signature: