RHBAA Membership Application

☐ Individual Membership $35 ($45 after January 15th)

☐ Family Membership $45 ($55 after January 15th) includes 2 adults & 2 children

Membership Cards Expire December 31st of each year.

We encourage all persons who are actively involved with the Racking Horse to become members. Your involvement in the RHBAA is important and we encourage you to join in making us strong and unified. Mail your application with a check or money order to:

RHBAA, 67 Horse Center Road, Ste. B, Decatur, AL 35603

Phone & Fax: 256-353-7225 **Email: info@rackinghorse.com** www.rackinghorse.com

AMOUNT ENCLOSED $ _____ ☐ **Cash** ☐ **Check** ☐ **Money Order** ☐ **Visa /MasterCard**

Check/Money Order # _____ Credit Card # _____Exp. Date _____ CVC Code _____

Name on Card _____ ***There will be a 3% surcharge added to all credit card payments*.**

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1. _____Membership # _____Birth Date _____ SS# _____

*Primary member, entitled to one (1) free pedigree registration, during the year foaled, each year membership dues are paid.

ADDRESS_____PHONE_____

CITY, STATE, ZIP _____EMAIL _____

2. _____Membership # _____ Birth Date _____ SS# _____

3. Juvenile _____Membership # _____Birth Date _____ SS#_____

A Juvenile member must be under 18 years of age. Date of birth is mandatory for Juvenile Members.

4. Juvenile _____Membership #_____ Birth Date _____SS#_____

A Juvenile member must be under 18 years of age. Date of birth is mandatory for Juvenile Members.

Under the penalties of perjury, I certify that the above information is true and correct:

SIGNATURE OF PRIMARY APPLICANT REQUIRED _____

Agrees to abide by the Rules and Regulations of the RHBAA. I am also entitled to conduct business with the RHBAA at reduced prices.

This application cannot be changed or altered in any way once it has been submitted and accepted by the RHBAA.