

2022 MEMBERSHIP APPLICATION

INITIALIO	RMATION	MBR
	did you hear about us?	
	nip Number:	
	np rtamber.	
	rship Name: (requires W9 on file)	
		Country:
Citv:	State/Province:	Zip/Postal Code:
		ell Secondary Phone:
Zimani.		
MEMBERSHIP 1	TYPE	
		Memberships expire December 31, 2022
	ludes the online version of the Cutting Horse Chatte	
	quarterly issues of the Cutting Horse Chatter (US&Ca	
Youth- \$25 * Age 18 and ur	nder, includes youth edition of the Cutting Horse Ch	natter, all other issues available online
nis member is a:□Traine	er □ Non-Pro □ Amateur □ None of these	(Non-Pro and Amateurs must complete the Non-Pro/Amateur Application)
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CIRCUIT DESIG	NATION	
Illea the address above t	to assign my circuit	owing circuit for 2022:
		OWITING CITCUIT TOT ZOZZ e year and wish to change its circuit, please email Ismith@nchacutting.co.
MAKE A DONA	TION	
NYCHA*		
	Denotions to the NVCLIA provide the expertualty for	s continued advication and daylar mont of aux Voutte
NYCHA*		or continued education and development of our Youth
	members through leadership & educational activities Donations to the PAC are used by NCHA's Texas Eve	es. ents PAC to support activities promoting legislation in
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REQUIRED SIGNATURE

By establishing or renewing your NCHA membership, or by paying your membership dues, the person making this membership application, including youth and parents where applicable (the "Applicant(s)"), as a condition of membership, agree to become familiar with and be bound by the rules of the Notional Cutting Horse Association published on the NCHA website. The Applicant(s) also expressly agree to have all disputes related to compliance with or violation of the rules resolved by the procedures provided in those proceedings will be final and binding. The afficial rules of the NCHA may be found at www.nchacutting.com. If the Applicant(s) is under 21 years of age, an affirmation of the contents in this application by a parent/equardian is required. The Applicant(s) is under 21 years of age, an affirmation of the contents in this application by a parent/equardian is required. The Applicant(s) and the Applicant(s) and the Applicant(s) and the Applicant(s) and the Applicant(s) are not the Applicant(s) and the Applicant(s) are not the Applicant(s) and the Applicant(s) are not to receive mail sent by or on behalf of the NCHA on the sent of the Applicant(s) and the Applicant(s) are not the Applicant(s) and the Applicant(s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the Applicant (s) are not to receive mail sent by or on behalf of the NCHA on the NCHA on the NCHA or the NCHA o

I.	Applicant Signature:	
	Youth Signature:	Parent Signature:
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