NCHA

2022 MEMBERSHIP APPLICATION

MEMBER INFORM	ATION	MBR
]New Member → How did	you hear about us?	
]Renewal 🔶 Membership N	lumber:	
Individual Name:		DOB:
Ranch, Business, Partnershij	Name: (requires W9 on file)	
Street Address:		Country:
City:	State/Province:	Zip/Postal Code:
Primary Phone:	Phone Type: 🛛 Home 🗆 Ce	ll Secondary Phone:
Email:		
— MEMBERSHIP TYP	E	Memberships expire December 31, 202
New Member – FREE includes	the online version of the Cutting Horse Chatter	

Renewal*- \$100 includes quarterly issues of the Cutting Horse Chatter (US & Canada only, International members receive online version)

□ Youth- \$25* Age 18 and under, includes youth edition of the Cutting Horse Chatter, all other issues available online

This member is a: Trainer Non-Pro Amateur None of these (Non-Pro and Amateurs must complete the Non-Pro/Amateur Application)

CIRCUIT DESIGNATION

MAKE A DONATION

\$_____NYCHA*
Donations to the NYCHA provide the opportunity for continued education and development of our Youth members through leadership & educational activities.
\$_____PAC*
Donations to the PAC are used by NCHA's Texas Events PAC to support activities promoting legislation in the state of Texas intended to support and enhance the NCHA Triple Crown.
\$_____NCHA Foundation*
Donations to the Foundation assist in their continued efforts to protect, preserve, and grow the sport of cutting for future generations along with providing scholarships to the youth.

PAYMENT METHOD

Please send application and payment to: NCHA Membership,	File 916204, Dept. 602, P.O. Box 961218, Fort Worth, Texas 76161-9797			
Check/Money Order				
Credit Card Number:	Exp Date: CVV:			
Name on Card:				
Billing Address:	Country:			
City: State/Province	ce:Zip/Postal Code:			
Signature:				
*Dues / Payments MAY BE deductible as an ordinary and necessary business expense, however, contributions and gifts to the National Cutting Horse Association are not deductible as charitable contributions for federal income tax purposes. Donations to NCHA Foundation, a 501 (c) (3) charitable organization, are deductible to the extent allowed by law.				

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 National Cutting Horse Association published on the NCHA website. The Applicant(s) also expressly agree to have all disputes related to compliance with any befound at www.nchacuting.com. If the Applicant(s) is under 12 years of age, an affirmation of the rules of the NCHA in this explicant of the Applicant of the understands that by providing his/her mailing and/or email address(es), they consent to receive mail sent by or on behalf of the NCHA and its members for NCHA related business as authorized by the NCHA Receive Director and that the /how the requisite authority to give such permission to the NCHA and behalf of the Applicant(s) and the Applicant(s) company.

Applicant Signature: Youth Signature:____

Parent Signature:_