

**Intermountain Reining Horse Association
2012 Membership Application**

Name: _____

Address: _____

City, State, and Zip: _____

Phone: _____ Cell _____

E-mail _____

(Newsletter will be sent by e-mail unless other arrangements are made)

Social Security #: _____

Required for all payouts

Individual Membership \$45.00
(All Exhibitors 19 and older must have an individual membership)

Family \$65.00 (Spouses and all children under 19)

Please list Family members; Youth members please list Birth Date:

Annual Memberships run from January 1 – December 31.

Membership entitles you and listed family members to show in IRHA approved reining, to compete for year-end awards, to receive the IRHA newsletter by e-mail and to promote the sport of reining in Utah.

By signing below, I accept the Rules and Regulations relating to the current IRHA Rules and Bylaws which are available on the IRHA website or in print.

Signature _____ Date _____

The success of the 2011 show season will largely depend on the amount of funds that can be raised by the membership.

Would you be able to commit to a donation to IRHA in 2011?

If so, how much: \$50 _____ \$100 _____ \$150 _____ \$200 _____ \$250 or more _____

Please send forms to:

IRHA, P.O. Box 21129, Axtell, UT 84621

Phone & Fax: 435-283-3406 E-Mail: betty.mayer@yahoo.com