



**Atlantic Reined Cow Horse Association**

an NRCHA Affiliate

**2010 MEMBERSHIP APPLICATION**

November 16, 2009 through November 15, 2010

New Member                       Renewal(membership#)\_\_\_\_\_

**CATEGORY (CHECK ONE)**

**REGULAR MEMBER**      \$35.00                       **GREEN RIDER NOM**      \$\_\_\_\_\_

\$20 PER RIDER – attach completed nomination form

**Day Pass(ARCHA only)**      \$20.00                       **HORSE NOM**                      \$\_\_\_\_\_

\$20 per horse/rider combo - attach completed nomination form

**FAMILY MEMBERSHIP**      \$55.00  
INCLUDES HUSBAND, WIFE, AND CHILDREN 18 YEARS AND YOUNGER AS OF JAN 1st

**Names of Family Members:**      Spouse \_\_\_\_\_

**Child's name:**      \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_ Date of Birth: \_\_\_\_\_

**YOUTH MEMBER –**      \$15.00  
OPEN TO RIDERS, 18 YRS AND YOUNGER AS OF JAN 1st OF THE CURRENT SHOW YEAR

**NRCHA MEMBERSHIP #** \_\_\_\_\_

**NAME** \_\_\_\_\_  
FIRST MIDDLE LAST

**ADDRESS** \_\_\_\_\_

**CITY, STATE, ZIP** \_\_\_\_\_

**HOME PHONE** \_\_\_\_\_ **CELL PHONE** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_ @ \_\_\_\_\_

Make checks payable to: Atlantic RCHA

Send Applications to: **Tom Iannotti**  
263 Friendship Road  
Monroeville, NJ 08343