KCPHA MEMBERSHIP APPLICATION

PLEASE READ MEMBERSHIP TYPES CAREFULLY

<u>Please Print</u>	KCPHA LOCAL MEMBERSHIP	
Name	Membership allows riders and horses entered in	
(Last, First, Middle Initial)		
Age of Junior Member Renewing Member Y N	KCPHA rated shows only to accumulate point	.5
Address	towards KCPHA Local year end awards.	
CityStateZip Phone ()	Please Circle Membership Type:	
Phone ()	Individual Member (one horse nomination)	50
E-mail		50 75
Trainer/Barn		5100
	Professional PHA	/100
		35
HORSE REGISTRATION	horses only.	
Use back, or separate sheet, to register additional horses.	Additional Horse Recording \$	5
PROFESSIONALS REGISTER LESSON HORSES ON BACK OF		
APPLICATION FORM		
HORSE 1	KCPHA OPEN POINTS MEMBERSHI	ſP
Name	Manuhamahin allowing non-neo-midano and hamaa	
Show name is the recorded name for the horse the entire show season	Membership allows non-pro riders and horses	
Renewing Horse Y N	participating in <u>USEF rated shows only</u> to	
ColorAgeSex Height	accumulate towards KCPHA Open Points Yea	ır
_	end awards.	
Owner	Junior/Amateur Membership \$	30
If not KCPHA member	Horse 1 USEF name and USEF #	
HORSE 2 RECORDING FEE \$5		
Name	Horse 2 USEF name and USEF #	
Show name is the recorded name for the horse the entire show season	Horse 2 USER hame and USER #	
Renewing Horse Y N		
ColorAgeSexHeight	Check# Total Membership \$	
Owner	* Members wishing to accrue points in both	
If not KCPHA member	programs must join both Local and Open Poin	uts.
C CONTROL ON DESCRIPTION OF A CONTROL A C		1705-110
PLEASE READ BEFORE SIGNING		
I/We hareby release V CDUA Owneys Managers Employed		
I/We hereby release KCPHA, Owners, Managers, Employee	-	1
responsibility in the event of injury, accident or loss during	or associated with a KCPHA sanctioned event or	norse
show.		
WARNI		
Under Kansas/Missouri law, there is no liability for an inju		imal
activities resulting from	the inherent risks of	
domestic animal activities K.S.A. 60-4001 through	60-6004/RsMO sec A ch.537, section 537,325.	
You are assuming the risk of participation	ng in this domestic animal activity.	
Signature		
If Junior Member, Signature of Parent/Guardian requi	red Date	
Print Name of Parent/Guardian		

Please make checks to KCPHA. Applications maybe mailed

Ettie Brightwell, 14113 Flint, O.P., KS, 66221

Phone