

# 2010 Membership Application



Please mail this completed form with your dues to:

**PHHA**  
1300 Market Street, Suite 303  
Lemoyne, PA 17043

**DUES:** \$40 per year payable by check or money order to the Pennsylvania Harness Horsemen's Association. Cash is accepted in person only.

## Personal Information

**NAME** \_\_\_\_\_

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

**CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

**PHONE (Home)** (\_\_\_\_) \_\_\_\_\_ **PHONE (Mobile)** (\_\_\_\_) \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**USTA #** \_\_\_\_\_

**MEMBERSHIP TYPE** (*Choose one*)  Owner  Driver  Trainer  Other \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

By submitting this application, I agree to comply with all terms and conditions of membership. Failure to comply may result in termination of my membership.

*PLEASE NOTE: Submittal of this application does not guarantee acceptance. Applications will be reviewed for eligibility and applicants notified of their status.*

### FOR OFFICE USE ONLY

Date Received \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Date Sent \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Paid by  Check  Cash  MO

717.975.0774 | [www.pahha.com](http://www.pahha.com)