NCHA

2023 MEMBERSHIP APPLICATION

	MATION	
🗖 New Member 🛛 🔶 How d	did you hear about us?	
🗖 Renewal 🔶 Membership	o Number:	
Individual Name:		
	ip Name: (requires W9 on file)	
Street Address:		Country:
	State/Province:	Zip/Postal Code:
-	Phone Type: 🛛 Home 🛛 Ce	II Secondary Phone:
Email:		
MEMBERSHIP TY	PE	
MEMBERSIII II		Memberships expire December 31, 2023
🗌 Renewal*– \$100 includes qua	arterly issues of the Cutting Horse Chatter (US &	Canada only, International members receive online version)
	ler, includes youth edition of the Cutting Horse Chatter, all of	
This member is a: \Box Tr	ainer 🗌 Non-pro 🗌 Amateur 🗌 None o	f these n-Pro and Amateurs must complete the Non-Pro/Amateur Application)
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CIRCUIT DESIGN	ATION	
\Box Use the address above to	$ ho$ assign my circuit $\hfill \square$ I designate the followir	ng circuit for 2023:
Circuit designation is not retroactive. To de	signate a circuit for a horse(s) you own or if you purchase a horse during the year and	wish to change its circuit, please email lsmith@nchacutting.com.
MAKE A DONATIC	DN	
	Donations to the NYCHA provide the opportunity for continued	adjustion and douglopment of our Youth members
\$NYCHA*	through leadership & educational activities.	education and development of our routh members
<pre>\$ NCHA Foundation*</pre>	Donations to the Foundation assist in their continued efforts to	educate our youth, protect the horse, preserve our past,
	and secure the sport of cutting for future generations.	
\$ PAC*	Donations to the PAC are used by NCHA's Texas Events PAC to support activities promoting legislation in the state of	
<u> </u>	Texas intended to support and enhance the NCHA Triple Crow	n.
PAYMENT METHC		
5	Please send application and payment to: NCHA Membership, File 916204, De	
		Exp Date: CVV:
		Country
City:	State/Province:	Country: 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, expressly consents and agrees to the following: (i) to become familiar with and be bound by the official rules of the National Cutting Horse Association as published on the NCHA website at www.NCHACutting.com; (ii) to have all disputes related to compliance with or violation of the rules resolved by the procedures provided in those rules and that the decisions made by the NCHA in those proceedings will be final and binding; (iii) that the NCHA may give any notice required under NCHA rules via email; (iv) that the Applicant is required to have a current email address on file with the NCHA and to promptly update that email address with the NCHA, if necessary; (v) that Applicant can only receive credentials for electronic voting by email and only at the email address provided to the NCHA by Applicant; (vi) by providing his/her mailing and email addresses. Applicant consents to receive mail and email sent by or on behalf of the NCHA at those addresses related to NCHA business; and (vii) the Applicant has the requisite authority to give such permission to the NCHA to use such email and mailing addresses. If the Applicant(s) is under 21 years of age, an affirmation of the contents in this application by a parent/guardian is required.

Applicant Signature: _

Youth Signature: ___

Parent Signature: _____