



PCHA

Pennsylvania Cutting Horse Association

2018
Membership &
Nomination
Application

To help ensure we have accurate information, please complete the entire contact section.

Name: _____ Date: _____

Address: _____

Primary Phone: _____ Alt. Phone: _____

Email: _____

Membership Applications

\$25 per adult

\$15 per youth*

NCHA # Adult 1 _____ NCHA # Youth 1 _____

NCHA # Adult 2 _____ NCHA # Youth 2 _____

All nominations include rider and all horses shown by PCHA member. Award recipients must participate in 40% of the PCHA approved classes. The rider and owner of any horse must be a PCHA member for points to count for year end awards. Only money won after paid nominations will count toward year-end awards.

NOTE: Youth are required to be PCHA members for points to count towards year-end awards, but the owners of horses they ride may be non-members.

Nominations

\$75 per adult

\$25 per youth

Adult 1: _____ Youth 1: _____

Adult 2: _____ Youth 2: _____

Adult 3: _____ Youth 3: _____

My signature below confirms above membership information, nominations for year-end awards, and my donation to the PCHA.

Signature: _____

**Please send completed forms to Karla Maynes:
karla@buckscountysaddlery.com
or PO Box 917, Buckingham, PA 18912**

Qty	MEMBERSHIP:	Amt
_____	Adult(s) @ \$25 each	\$ _____
_____	Youth(s) @ \$15 each	\$ _____
NOMINATIONS		
_____	Adult(s) @ \$75 each:	\$ _____
_____	Youth(s) @ \$25 each:	\$ _____
_____	Donation to PCHA:	\$ _____
_____	Total Enclosed:	\$ _____

Thank You!

Office Use Only: Payment received: ___ On Settlement ___ Cash ___ Credit Card ___ Check # _____

Received by: _____ Date: _____