



# HARNESSES HORSE ASSN

OF CENTRAL NEW YORK

P.O. BOX 586 • VERNON, NEW YORK 13476

Ph. (315) 829-3872 • FAX (315) 829-4350

[www.hhacny.com](http://www.hhacny.com)

email: [harnesshorsecnj@juno.com](mailto:harnesshorsecnj@juno.com)

## APPLICATION FOR MEMBERSHIP

1 Year \$25.00

2 Years \$40.00

3 Years \$50.00

Name \_\_\_\_\_

Date \_\_\_\_\_

Street \_\_\_\_\_

Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Phone \_\_\_\_\_

USTA No. \_\_\_\_\_

E-Mail \_\_\_\_\_

Active Member

Driver

Breeder

Owner

Trainer

Associate Member

I, the undersigned, hereby apply for membership in the Harness Horse Association of Central New York, Inc. and, if accepted, agree to abide by its by-laws.

Signed \_\_\_\_\_