



INDIANA HUNTER JUMPER ASSOCIATION MEMBERSHIP APPLICATION

| | | |
|------------------------|--|--|
| Membership Type | <input type="checkbox"/> Individual (\$40) | <input type="checkbox"/> Family (\$60 for first two members/\$30 each additional member) |
|------------------------|--|--|

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|--------------|--|--------------------------|--|--------------------------|---|
| Name | | USEF/ USHJA # | | Member Type | <input type="checkbox"/> Amateur <input type="checkbox"/> Professional <input type="checkbox"/> Junior |
| Email | | Phone | | Date of Birth | |

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|--------------|--|--------------------------|--|--------------------------|---|
| Name | | USEF/ USHJA # | | Member Type | <input type="checkbox"/> Amateur <input type="checkbox"/> Professional <input type="checkbox"/> Junior |
| Email | | Phone | | Date of Birth | |

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|--------------|--|--------------------------|--|--------------------------|---|
| Name | | USEF/ USHJA # | | Member Type | <input type="checkbox"/> Amateur <input type="checkbox"/> Professional <input type="checkbox"/> Junior |
| Email | | Phone | | Date of Birth | |

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|--------------|--|--------------------------|--|--------------------------|---|
| Name | | USEF/ USHJA # | | Member Type | <input type="checkbox"/> Amateur <input type="checkbox"/> Professional <input type="checkbox"/> Junior |
| Email | | Phone | | Date of Birth | |

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|--------------|--|--------------------------|--|--------------------------|---|
| Name | | USEF/ USHJA # | | Member Type | <input type="checkbox"/> Amateur <input type="checkbox"/> Professional <input type="checkbox"/> Junior |
| Email | | Phone | | Date of Birth | |

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|--|--|-----------------------------------|--------------|------------|--|
| Street Address | | | | | |
| City | | State | | Zip | |
| Phone | | | Email | | |
| Do you ride with a trainer? | <input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, Trainer's Name | | | |

Business Membership: \$60 (includes two voting rights)

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|-----------------------|--|--------------|--------------|------------|--|
| Business Name | | | | | |
| Street Address | | | | | |
| City | | State | | Zip | |
| Phone | | | Email | | |



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Horse Registration: Horses must be registered and owned by an IHJA member to earn points towards year-end awards for Hunter and Jumper divisions. \$60 for first horse/\$50 each additional horse

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|---------------------|--|-----------------------------|--|----------------------|---|
| Horse's Name | | Horse's USEF/USHJA # | | Horse's Color | |
| Owner's Name | | Horse's Age | | Horse's Sex | <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion |

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|---------------------|--|-----------------------------|--|----------------------|---|
| Horse's Name | | Horse's USEF/USHJA # | | Horse's Color | |
| Owner's Name | | Horse's Age | | Horse's Sex | <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion |

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|---------------------|--|-----------------------------|--|----------------------|---|
| Horse's Name | | Horse's USEF/USHJA # | | Horse's Color | |
| Owner's Name | | Horse's Age | | Horse's Sex | <input type="checkbox"/> Gelding <input type="checkbox"/> Mare <input type="checkbox"/> Stallion |

Optional Donations

I would like to sponsor a division! For a \$350 donation, you or your business will receive recognition at the year-end awards banquet as a division sponsor.

Preferred division(s): _____

I would like to make a donation of \$ _____ to be allocated to: Annual Show Medal Finals Banquet
 General Fund Horseman's Assistance Fund

Submit application and all fees to:

Indiana Hunter Jumper Association
6112 Golden Eagle Drive
Zionsville, IN 46077

Phone: 317-809-2208
Email: ihja.secretary@gmail.com