



MEMBERSHIP APPLICATION

Applicants denied membership will be notified within 30 days of receipt of application by US Mail. Appeals can be made to:
LCHA Executive Board
PO Box 132
Mesilla Park, NM 88047

Official Use Only
Date: _____
Cash _____
Check # _____
Amount: \$ _____
Received by: _____

Renewal Year: 20 _____ **New Member**

Please circle area(s) of interest: Gymkhana Hunter/Jumper Eventing Western

Name: _____ Phone: _____ (h) _____ (w) _____ (c)

Address: _____ (City/State) _____ Zip _____

Email address: _____ **Membership Type: Single \$20 or Family \$30**

Names of All Family Members and ages (riding and non-riding) who may participate in LCHA Sponsored events (list addl members on back)

I hereby give permission for all family members listed above to participate in any and all activities of the Las Cruces Horseman's Association. The LCHA, it's officers, directors, officials and employees are hereby released, acquitted and discharged from any claim for damage to person, horse or property during the course of shows, gymkhanas, trail rides, social functions, or any other sponsored organized activity, including transportation to or from activities, and in the regard, I hereby covenant that on my own behalf and for my spouse and/or child/children not to file claim or bring suit with respect to any such injury.

I understand the Las Cruces Horseman's Association Work/Fee Rule: In order to receive year-end awards, each rider/competitor must work 8 hours per division in which they qualify for year-end awards or pay the work/service fee of \$100 per rider/competitor per division. Work/service must be completed, or fee must be paid by the last event of the season in order to be eligible for year-end awards. Members and/or their representatives may work for the division of their choice.

I understand that Membership Dues are \$30 per year per family or \$20 per year per individual. A family is considered to be a husband/wife and unmarried children living at home full time. Membership dues must be paid before the start of the event in order to qualify for year-end points. My signature below indicates that all family members listed above understand and will abide by the rules of the Las Cruces Horseman's Association.

_____ (please initial) I also give permission for photos of myself and my family members listed above to be used in promotional materials and online (LCHA website and Facebook or other social media) to promote or advertise LCHA events.

This form must have your signature or application will NOT be accepted.

Return form and dues payment to:

LCHA
PO Box 132
Mesilla Park, NM 88047

Signature of Applicant (or parent/guardian if applicant is under 18)

Date: _____