



# Missouri Reining Horse Association 2008 Membership Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Other) \_\_\_\_\_

Email: \_\_\_\_\_

Individual Membership (\$20) \_\_\_\_\_

Corporate Membership (\$25) \_\_\_\_\_

Family Membership (\$25) \_\_\_\_\_

Mailing List Only (\$5) \_\_\_\_\_

For affiliate requirements please list the NRHA # of every member:

Name	NRHA #
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

I will be willing to help at the Wild Slide \_\_\_\_\_ and/or Autumn Slide \_\_\_\_\_.

I will be willing to sponsor classes at the \_\_\_\_\_ Wild Slide and/or Autumn Slide \_\_\_\_\_

Lawson (\$430) \_\_\_\_\_

Pewter (\$95) \_\_\_\_\_

Morrison (\$270) \_\_\_\_\_

Plaque (\$40) \_\_\_\_\_

Please mail membership dues to:

Denise Holiman, MRHA Treasurer  
199 Audrain Road 241  
Centralia, MO 65240  
(573) 682-1648