



GEORGIA HUNTER JUMPER ASSOCIATION, INC.

202 South Main Street, Ste 200 ■ Alpharetta, GA 30009 ■ execsec@ghja.org

Visit our website for news, point standings, sponsor links and other resources: www.ghja.org

2019 Membership Application

Renewal New

Date:	I am enclosing \$ _____ check # _____.		
GHJA Membership #:		USEF Membership #: (if available)	
Name:		<i>Please print name in the exact manner in which it will be used to sign in at all horse shows.</i>	
Address:		Date of Birth (juniors only): / /	
City:		State:	Zip:
Home Phone:		Cell Phone:	
E-mail Address:			
Parent/Guardian email address:			
Trainers: <input type="checkbox"/> Please include my name, barn name, address and work phone in the online Trainers Directory. Barn Name: _____			
Annual membership dues:			
<input type="checkbox"/>	Family	\$70	2 junior <u>or</u> 1 senior & 1 junior member Other Family Member: _____
<input type="checkbox"/>	Senior	\$55	members who are 18 years of age or older as of December 1, 2018
<input type="checkbox"/>	Junior	\$45	members who have not reached 18 th birthday as of December 1, 2018
<input type="checkbox"/>	Life	\$400	
<input type="checkbox"/>	Sustaining	\$30	for <u>non-competing</u> members. You will <u>not</u> be eligible for the awards program

Applicant Signature: _____ Date: _____

Applicant hereby agrees to be bound by the Bylaws and Rules of the GHJA now in effect or as subsequently adopted.

Application for Horse Recording

- New Recording** \$35 *lifetime recording of horse*
- Name Change** \$15 *to change the registered name on a horse with an existing GHJA membership*
- Owner Change** \$15 *to transfer permanent ownership from one GHJA member to another GHJA member*
- Lease Change** \$15 *to transfer temporary ownership from one GHJA member to another GHJA member*

Date:	I am enclosing \$ _____ check # _____.		
GHJA Recording #:		USEF Recording #: (if available)	
Horse Name:		Sex: <input type="checkbox"/> Mare <input type="checkbox"/> Gelding <input type="checkbox"/> Stallion	
Breed:		Color:	Height:
Markings:			
Owner Name and GHJA #:			
<i>*Owner must be a current GHJA member – if you are leasing a horse and showing under the owner’s name, they must be a member as well*</i>			
Address:		Phone: ()	
City:		State:	Zip:
Previous Name/Owner (if applicable):			

Where horses are to be recorded and/or shown under a stable or farm name, same should be noted

There will be a \$25 NSF charge for all checks that are returned from the bank.