

# 2010 OUTREACH MEMBERSHIP APPLICATION

UNITED STATES HUNTER JUMPER ASSOCIATION

UNITED STATES



HUNTER JUMPER ASSOCIATION

Outreach Members are those individuals competing in classes that qualify for the Affiliate Equitation Awards Program and receive the following USHJA benefits:

- Subscription to the USHJA *In Stride* bi-monthly magazine.
- Bi-weekly emails of USHJA E-Update providing important news, reminders, resources, and information.
- Access to USHJA Trainers Directory, Trainers Q & A, Trainers Resource Guide, Owners Resource Guide, Breeders Directory and Competition & Facility Directory.
- Discounted magazine Subscriptions to Primedia's Equine Magazines (*Practical Horseman*, *EQUUS*, *Horse & Rider* and *Dressage Today*), books, DVDs and other equine related merchandise.
- Inclusion and involvement in the governance of the hunter and jumper disciplines from the grass roots to the high performance level.
- Member services provided by knowledgeable hunter and jumper staff members.
- An annual convention exclusively for the hunter and jumper disciplines including rule changes, educational seminars, clinics and forums.
- Increased influence in the development, promotion, and management of the hunter and jumper industry.

**Please note:** Outreach Members are subject to USHJA non-member fees if competing in USEF licensed competitions.

Name: \_\_\_\_\_ USEF/USHJA# \_\_\_\_\_

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

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

Phone (Day): \_\_\_\_\_ Phone (Evening): \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Primary Designation (Circle One) HUNTER or JUMPER

Outreach Annual Membership Fee: \$15

**By submitting this application and membership dues, you agree to uphold USHJA's Ethic's Policy**

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PAYMENT INFORMATION (Do not detach)

Total Amount Enclosed: \$ \_\_\_\_\_

Please do not send cash (Make checks payable to the United States Hunter Jumper Association)

Check # \_\_\_\_\_

Visa  Master Card  Discover Card

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CARD NUMBER

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EXPIRATION DATE

Card Holder's Name (Please print): \_\_\_\_\_ Billing Zip Code: \_\_\_\_\_

Card Holder's Signature: \_\_\_\_\_

MAIL APPLICATION AND PAYMENT TO:  
USHJA, 3870 Cigar Lane, Lexington, KY 40511  
Phone (859) 225-6700 • Fax (859) 258-9033  
www.ushja.org