



MEMBERSHIP APPLICATION

Mail to: MHHA, PO Box 436, Augusta, ME
04332

Phone (207)623-6442 Fax (207)623-6444
Email: info@mainehha.com

PLEASE PRINT LEGIBLY:

NAME (LAST) _____ (FIRST) _____

MAILING ADDRESS _____

TOWN _____ STATE _____ ZIP _____

PHONE (_____) _____ CELL (_____) _____

SOCIAL SECURITY # _____ or Tax ID# _____

This will be provided to the Agricultural Fairs.

USTA # _____



E-Mail address _____

Please check the box to receive your newsletter by e-mail. This will **save MHHA lots of money** and lots of paper!

Physical Location(s) where horses are usually stabled:

Stable _____ Town, State _____

Membership Fees:

() **Full Membership \$50.00** This provides 3rd party public liability insurance, fire/disaster insurance, voting privileges, option to join sulky reimbursement program and the quarterly newsletter.

() **Associate Membership \$20.00** This provides only the newsletter for people with an interest in harness racing. No voting privileges in MHHA elections.

\$ _____ **Scholarship Contribution**

Payment Method:

() Check enclosed () VISA () MasterCard

Card number _____

Expiration date _____ / _____

Name as it appears on credit card _____

Billing Address of credit card, if different from applicant's address _____
