

**WESTERN NEVADA CUTTING HORSE ASSOCIATION**

MEMBERSHIP APPLICATION

(All membership applications are subject to review by the Board of Directors)

Name:

Address:

City/State/Zip:

Phone: Cell:

Email Address:

NCHA #

Social Security Number:

Annual Dues: $50.00 plus $10,00 for each additional family member

Youth Dues: $10.00 each

Date Paid Check/Cash Amount

I want my newsletter: Emailed Mailed

Family memberships will receive one newsletter per family

Name Relationship NCHA #

Family Member(s)

Horse(s) Name(s) REGISTERED HORSES MUST BE SHOWN UNDER REGISTERED NAMES)

PLEASE MAKE CHECKS PAYABLE TO:

WNCHA

MAIL TO:

Zeona Cilonis

20965 Ames Lane

Reno, Nevada 89511

(775) 287-7018 [Zaldiranch@att.net](mailto:Zaldiranch@att.net)