



KANSAS CITY REGIONAL FOX TROTTING Horse association



New Membership and Renewal Application

Membership Renewal due October 1.

Name: _____

\$10 each ADULT MEMBERSHIP

New Applicant(s) Total Amount:

Address: _____

Renewal

City: _____

Renewal: What year did you 1st join? _____ Have you renewed every year since?

State: _____ Zip: _____

Are you a current member of the Missouri Fox Trotting Horse Association?

Home Phone: _____

If yes, what is your MFTHBA membership # _____

Cell: _____

I am sponsoring the following youth (ages 17 & under **FREE** w/sponsoring adult):

E-Mail: _____

List youth name(s): _____

Website: _____

FREE NEW MEMBERSHIP* * A non-member is entitled to a one-time FREE membership upon purchasing a Fox Trotter from a KCRFTHA member.

Mark box above left for information you want left OUT of the annual KCRFTHA Membership Directory

Purchased Horse From KCRFTHA Member: _____

Return APPLICATION with PAYMENT to:

Rick Hoffman - KCRFTHA Treasurer

5436 Falmouth Road

Fairway, KS 66205-2660

(913) 205-6169

Make check payable to: K.C.R.F.T.H.A.

How did you hear about the KCRFTHA?

Seminar

KCRFTHA Website

Another Member ~ Who? _____

Social Media ~ Where? _____

Other _____

OR, email application to: kcrftha.treas@gmail.com

Date received by Treasurer: _____

Pay via PayPal account: kcrftha.treas@gmail.com