



**2021 Kentucky Walking and Racking Horse Trainers Association
Membership Information**

Check One: _____\$25 Trainer/ Individual _____\$10 Associate/Individual

Name: _____

Stable Name: _____

Address: _____

City, State, Zip: _____

Home Phone and/or Cell #: _____

**Mail to: KWRHTA
2439 Columbia Hwy, Greensburg, KY 42743**

Date Paid _____