

**2024 Kentucky Walking and Racking Horse Trainers Association
Membership Information**

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

Name: _____

Children: _____

Address: _____

City, State, Zip: _____

Home Phone and/or Cell #: _____

Mail to: KWRHTA
2439 Columbia Hwy, Greensburg, KY 42743
Date Paid _____