



# Central Kentucky Racking Horse Association

## 2025 Membership Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City : \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

● Home Phone: \_\_\_\_\_

● Business Phone Number: \_\_\_\_\_

● Barn Phone Number: \_\_\_\_\_

● Mobile Phone Number: \_\_\_\_\_

● Email: \_\_\_\_\_

Family Membership Only: (Spouse and Children 17 and under as of 1/1/25)

■ Spouse: \_\_\_\_\_

■ Children: \_\_\_\_\_

● \_\_\_\_\_ New \_\_\_\_\_ Renewal Individual Memberships \$15

● \_\_\_\_\_ New \_\_\_\_\_ Renewal Family Membership \$20 includes children 17 & under

- Anyone 18 years old or older by January 1, 2025 must have an individual membership
- Membership applications must be received by June 1, 2025 to be eligible for high point awards
- Owner, Trainer, and Rider listed on the entry sheet must **ALL** be members to be eligible for high point awards
- Memberships are for calendar year (January -December)
- You must be a member to be eligible to vote at the General Membership Meeting

Make Checks payable to: CKRHA  
309 N Jackson Street  
Perryville, KY 40468

**Internal Use Only:**

Date Received: \_\_\_\_\_ Payment Type: Cash: \_\_\_\_\_ Check Number: \_\_\_\_\_ Amount: \_\_\_\_\_