



Northern New Mexico Horsemen's Association

Membership Application

Please complete and mail with check to NNMHA, P.O. Box 4124, Santa Fe, NM 87502

Date _____

\$25 Individual \$30 Family

Type Renewal New

Name: _____

Other family members: _____

Street: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Email(PLEASE print clearly)_____

Include my information in membership directory
to be handed out to all Association members Yes No

Yes! I would like to volunteer!

Our Association can only function with the generous donation of time and effort by many members. Please indicate your preference for volunteering. (If you don't indicate anything here, we will be calling to ask with what area you can help.)

- Shows
- Play Day
- Plan clinics
- Event publicity
- Help with Ridge Riders(trail rides)

- Find guest speakers
- Christmas party help
- News/website help
- Other _____