



OHJA Membership Application

MEMBER INFORMATION

First Name	_____	Last Name	_____	MI	_____
Address	_____				
City	_____	State	_____	Zip	_____
Home Phone	_____	Cell Phone	_____	Email	_____
Date of Birth	_____	Trainer	_____		
Member Type	<input type="checkbox"/> Junior (\$25)	OHJA #	_____		
	<input type="checkbox"/> Adult (\$35)	(if renewal)			
	<input type="checkbox"/> Farm (\$55)				

HORSE INFORMATION

Horse Name	_____	OHJA #	_____	Foaling Date	_____
		(if renewal)			
Color	_____	Sex	_____	Height	_____
Horse Registration (\$20)					

PAYMENT INFORMATION

CHECKS ONLY. Please include a check with your membership application.

Mail form and payment to:

Tracy Beavers • OHJA Executive Secretary
1395 Celtic Dr. • Pataskala, OH 43062
E: ohiohunterjumperassoc@gmail.com • P: (216) 262-2717