

Year _____

New England Horsemen's Council, Inc.

Tel: (603) 300-6499
E-mail: cindy@nehc.info
Website: nehc.info

Membership Runs 12/1 through 11/30

191 WILKINSON SWAMP ROAD • EFFINGHAM, NH 03882

CHECK ONE: NEW or RENEWAL

I herby apply for and enclose payment for the following type of membership:

- Life Associate – \$600.00 Family Associate – \$55.00 per year
 Individual Associate – \$35.00 per year Corporate Associate – \$80.00 per year
 Donation for Scholarships Amount \$ _____ Tax Deductible

Membership Number: _____ Life Member Since: (if applicable) _____

Name _____

Address _____

City/Town _____ State _____ Zip Code _____

Telephone: () _____

Cell: () _____

Email: _____

NEW for 2020 Horse Point Registration *No Fee Required*

NEHC members who wish to accumulate points for Year-End Awards must register their horse or pony with the Administration Office.

Number of horses/ponies you wish to register # _____ with NEHC

(Please list names of horses or ponies you are registering on back of application.)

Please Note: Points will begin to accumulate only when your membership fee and the list of horses/ponies you are registering is received by the Administration office.

At this time, I do not wish to register for points.

AMATEUR APPLICATION YEAR _____

New England Horsemen's Council Inc.

I certify that I am eligible for Amateur status under the conditions of the Amateur Rule. (Check One) Yes _____ No _____

Check one of the following if you are showing an Amateur Adult Hunter or Amateur Owner Hunter:

Div. A (18-35) or Div. B (over 35) DOB: _____

Signature: _____

All USAE Member Cards are accepted at any NEHC Affiliated Show. Amateur Status will be indicated on your membership card.

Juniors need not apply.

Amateur cards must be renewed annually. Non-member Application Fee \$10.00.

NAME OF JUNIOR EXHIBITOR OR AMATEUR:	SHOW AGE	DATE OF BIRTH
1. _____		
2. _____		

JUNIOR EXHIBITOR	AMATEUR (18-35)	(Over 35)
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A or	<input type="checkbox"/> B
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> A or	<input type="checkbox"/> B

*H=HORSE S=SMALL PONY M= MEDIUM PONY L= LARGE PONY (PLEASE USE EXTRA PAPER IF NECESSARY)

HORSE/PONY INFORMATION FOR POINT ACCUMULATION:				**Leased Horses – please send lease agreement to administration office		
Registered Name:	SIZE*	GREEN (1st or 2nd)	SEX (Mare, Gelding, Stallion)	BREED	OWNER (if different than member)	**LEASED (Yes or No)
1. _____						
2. _____						
3. _____						
4. _____						

DIVISIONS INTERESTED IN FOR PRIZE LIST MAILINGS:

Hunter/Jumper- Breed- None

Note: Prize lists will not be sent unless filled out by member.

I herby agree to abide by the Constitution and By-Laws of the New England Horsemen's Council, Inc.

Signature: _____ Date: _____

PLEASE FILL OUT ALL THE THE INFORMATION. IF NOT FILLED OUT PROPERLY IT COULD AFFECT YOUR POINT STANDINGS.
BE SURE TO MAKE ENTRIES AT ALL SHOWS UNDER NAMES APPEARING ON THIS APPLICATION.

OFFICE USE ONLY

Date: _____

Show Secretary _____

Name of Show _____

Location _____

Date of Show _____

Ck amount _____ # _____

