



# NEW JERSEY HORSE ASSOCIATION, INC. 2023 MEMBERSHIP FORM

## FAMILY MEMBERSHIP

*Age Requirement: 17 years and under must*

*Sign up with Parent or Legal Guardian*

On or Before 3/31/23 \$35.00

After 3/31/23 \$40.00

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

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

City: \_\_\_\_\_

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

Phone Number(s) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

## INDIVIDUAL MEMBERSHIP

*Age Requirement: 18 years and over*

On or Before 3/31/23 \$25.00

After 3/31/23 \$30.00

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

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

City: \_\_\_\_\_

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

Phone Number(s) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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Please complete the name of each exhibitor and horse combination.

Age as of 1/1/2023

Member \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Member \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Member \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

Member \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

*Please sign below stating that you understand and agree to abide by all NJHA Show and Membership rules as published. Points will only count from the date membership fee is received. Any points earned prior to date of membership will not count toward year-end awards. If you change divisions during the year, you are ineligible to receive a year end award, for either division.*

New Jersey	WARNING: UNDER NEW JERSEY LAW, AN EQUESTRIAN AREA OPERATOR IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ANIMAL ACTIVITIES RESULTING FROM THE INHERENT RISKS OF EQUINE ANIMAL ACTIVITIES, PURSUANT TO P.L.1997, c.287 (C.5:15-1 et seq).	This applies to "operators" (as defined in the law). The law states, "All operators shall post and maintain signs on all lands owned or leased thereby and used for equine activities, which signs shall be posted in a manner that makes them visible to all participants and which shall contain the . . . notice [above] in large capitalized print." For those who are not "operators," the law states, "Individuals or entities providing equine animal activities on behalf of an operator, and not the operator, shall be required to post and maintain signs required by this section."
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Exhibitor or Parent/Legal Guardian\*

Date: \_\_\_\_\_

\*Proof of Legal Guardianship is required

Completed forms may be mailed or handed in with payment at any General Membership Meeting or horse show to the Show Secretary or you may mail completed form with payment to: <b>NJHA c/o Dawn Edmonds, 358 Monroeville Road, Monroeville, NJ 08343</b>				
FOR OFFICE USE ONLY:				
Date Rec'd: _____	Check Amt:\$ _____	Check No.: _____	Cash Amt: \$ _____	TOTAL AMT:\$ _____