



Harness Horseman's Association of New England, Inc.  
P.O. Box 1811 ~ Plainville, MA 02762

**SAVE A STAMP! Use the QR code and  
renew your membership on line**



HHANE Office: 508-316-3364  
www.hhane.com

**Make changes to printed mailing address here**

## 2026 INDIVIDUAL ACTIVE MEMBERSHIP APPLICATION

Expires 12/31/26

HHANE membership is valid for individuals only. Benefits include participation in the Third Party Liability Insurance program offered through HHI (Harness Horsemen International). **Your HHI insurance coverage requires you to be a member in good standing and will expire December 31, 2026.** HHANE Sulky Accident Insurance Program (maximum \$1000 without wheels) offered at no charge for one registered/inspected sulky.

### ATTENTION TRAINERS & DRIVERS:

**Applications must be received by May 31<sup>st</sup> to be eligible for the Retirement Savings Plan (RSP). NO EXCEPTIONS!**

**Name** *only individual memberships accepted; owners of stables  
or corporations must apply individually.*

USTA # \_\_\_\_\_ MGC # \_\_\_\_\_

**Please check all that apply:**

☐ Owner ☐ Trainer ☐ Driver ☐ Caretaker/Groom

**Home address**

St \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Mailing address** check here if home and mailing addresses are the same ☐

St/PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Phone (home):** \_\_\_\_\_

**Email:** Format: xxx @ xxx.xxx

*This is how we reach you quickly with important information.*

**Phone (cell):** \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

**Stable Information – If you race under a stable or company name, please complete:**

**Stable/Co:** \_\_\_\_\_ **Trainer:** \_\_\_\_\_

St/PO Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Enclosed is my check for \$75 made payable to HHANE in payment of my ACTIVE membership dues.**

I hereby apply for membership in the Harness Horseman's Association of New England (HHANE) and agree to abide by the organization's By-Laws. HHANE is my sole authorized representative for contract negotiations with PGR (Plainville Gaming and Redevelopment LLC).

With this appointment I hereby revoke any and all authorities given by me for similar purposes.

If you do not agree to the following, initial here: \_\_\_\_\_

I agree to give HHANE the right to use my name, picture, portrait, or photograph in all forms and media and in all manners including such purposes as publicity, illustration, advertising, and web content.

**Applicant's signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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-- Office Use Only --

Rec'd \_\_\_\_\_ \$ \_\_\_\_\_ Ck # \_\_\_\_\_

Dep \_\_\_\_\_ R&C \_\_\_\_\_

Cvg 1 2 3 4 5 ☐ Cash Receipt # \_\_\_\_\_

DB MC RSP

HHI \_\_\_\_\_