

Check here if nar	ne or address changed	(Please print c	learly)				
Name: Date of birth:							
Address:							
City:		State:			Zip + 4:		
ome Phone: Day Phone		hone:	ne: E-Mail:		l:		
Membership type:				NSBA ID # (if known)			
	e(s) on membership must C or Corporation)	-		-	ion papers)		
Individual (plea	se select one)						
Open Rider					Non-Rider		
Youth/Junior Rider (Must hold a current youth card)					EWD Rider*		
Non Pro	Amateur Rider (May h	old a current breed	d amateur cai	rd) *must su	ıbmit EWD Specia	al Diagnosis every t	wo years
Breed Affiliation:	_AQHAAPHA	ApHC	_PHBA	PtHA	IBHA	ABRA	_POA
USEF U	SHJA Aff	iliate Card Numb	ber				
Membership level: (Check one)	Regular(includes a magazine subscription)Additional(each additional family member at same address-no magYouth(no magazine)3 year(includes a magazine subscription)Lifetime(includes magazine for 1 year)International(non US address-no magazine)Magazine Subscription (US residents)Magazine Subscription (Canadian residents)Magazine Subscription (All other international residents)Add \$10 Renew at ShowAdd \$45 Rush ChargeDuplicate MembershipI would like to make a donation to the NSBA Animal Welfare FundI would like to make a donation to the NSBA Youth ScholarshipTotal amount enclosed and/or char				\$40 \$200 \$1,500 \$35 \$45 \$75 \$150 \$10 \$45 \$10 \$ \$ \$		
Payment method:	Fees above are the Check/Money of	-				ess/Discover	•
Credit Card #:		Evn [)ata:	2 diait	Cand Casumi	ty Code	

Signature: _

By becoming a member, you agree to receive occasional emails from the National Snaffle Bit Association regarding your membership, important updates, newsletters, promotional offers and other related communication. NSBA respects your privacy and does not share your personal information with third parties. You can opt out of receiving these emails any time by clicking the unsubscribe button at the bottom of our emails or by contacting us directly.