

# Tri-Cities Horsemen's Association

## TRAILS PARTICIPATION PROGRAM

### RIDER REGISTRATION

Year: \_\_\_\_\_

Annual Fee: \$10.00

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

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

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

Area Code & Phone Number :\_(\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Participation year is from **October 1<sup>st</sup> to September 30th.**

**Make checks payable to: Tri-Cities Horsemen**

**For Program Chair Use:**

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

Check # or Cash: \_\_\_\_\_

Mail with check payable to TCHA to:

Laurie Abed

111 Sequoia Way

Martinez Ca 94553