

## **Application for New Youth Membership**



From one equine enthusiast to another, we invite you to join the U.S. Trotting Association! Become a part of our harness racing family, there's never been a better time to be a Youth Member. Your Youth Membership is FREE, and you will receive a FREE subscription to Youth Beats, the fastest-growing quarterly magazine for and about kids in harness racing.

If you would like to subscribe to the monthly Hoof Beats magazine, please call the office or subscribe online at MyAccount.ustrotting.com.

For more information about Youth Membership, or to check out our complete list of member benefits, visit us online.

## Thanks for being a part of the USTA—it wouldn't be the same without you!

PERSONAL INFORMATION																																			
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Email  I do  I do	Area Code Home Phone Number Area Code Business Phone Number Area Code Mobile Phone Number  Email address  I do NOT wish to receive special offers in the mail from USTA selected partners.  I do NOT wish to receive e-mails from USTA selected partners.  I do NOT wish to receive any e-mail correspondence from the USTA.  Do NOT give out my contact information (name, phone numbers, e-mail, address) to others.																																		
I hereby apply for active membership in the United States Trotting Association. In doing so and as long as I am a member, I subject myself to all provisions of the Bylaws, Rules and Regulations of the Association and agree to abide by and observe all of such provisions including Article I, Section 12 of the Association Bylaws, which limits suits against the Association to the courts, Federal or State, of the jurisdiction within which the principle office of the Association is located. I certify that all information herein is true and complete to the best of my knowledge and belief. I understand that in connection with this application, a routine inquiry may be made to provide information as to my experience, character, general reputation, personal characteristics and mode of living. I authorize verification of this information and of the information provided herein, and release all concerned from any liability in connection therewith. I am aware that a false statement on this application will be sufficient reason for revocation of my membership or denial of my application.z																																			
<u>x</u>	X Signature of person applying or parent/guardian														_				Da	te				_											



Fax (toll free U.S. & Canada): 844.229.1338