

Southeastern Reined Cow Horse Association Membership Application

Please complete all sections of this form and submit it to become a member of the Southeastern Reined Cow Horse Association (SERCHA).

Personal Information:		
*Full Name:		
*Address:		
*City:	State:	_ Zip Code:
*Phone Number:	Email:	
*Date of Birth:	Gender: Male _	Female
*NRCHA Membership #(required):		
Family Member #2 Information:		
*Full Name:		
*Address:		
*City:	State:	
*Phone Number:	Email:	
*Date of Birth:	Gender: Male _	Female
*NRCHA Membership #(required):		
Family Member #3 Information: *Full Name: *Address: *City:	State:	_
*Phone Number:		
*Date of Birth:		Female
*NRCHA Membership #(required):		
Family Member #4 Information: *Full Name:		
*Address:		
*City:	State:	-
*Phone Number:		
*Date of Birth:	Gender: Male _	Female
*NRCHA Membership #(required):		

Are you a trainer who would like to be listed in our online Trainer Directory? Yes _____No____

If yes, please provide:

Name of Company ______

Website or Facebook Page: ______

Best Contact Phone #: ______

Email Address: ______

Membership Type:

[]Youth Membership - \$35/year

[] Regular Membership - \$50/year

[] Green Rider Membership - Free for first year

[] Family Membership (Includes all family members at the same address) - 75/year

*Note - Green Rider Membership - is free for the first year, the second year and after is considered a Regular Membership. A Green Rider can only show in Green Classes. Green Riders cannot have gone down the fence in any NRCHA event in order to be in the Green Program.

*Non Pro Declaration must be completed and accompany a current membership application with current dues for **Non Pro Competitors**. (See separate Non Pro Declaration page)

Liability Waiver:

I, the undersigned, understand and acknowledge that participation in SERCHA activities carries
inherent risks. I hereby release SERCHA and its officers, directors, and members from any
liability for injury, loss, or damage to persons or property arising out of my participation in
SERCHA activities.

*Signature: ______ Date: ______

Photography and Media Consent:

I hereby grant SERCHA permission to use photographs and videos taken of me during SERCHA events for promotional and marketing purposes.

*Signature:	Dat	te:

Membership Agreement:

By signing below, I agree to abide by the SERCHA bylaws.

*Signature: _____

Date:			

Submitting Your Application:

- For in-person submissions and payment, please attend one of our shows and submit to the Show Office.
- For online submissions and payment, visit our website at https://www.southeasternrcha.com and follow the membership application instructions.

Thank you for joining the Southeastern Reined Cow Horse Association. We look forward to having you as a member!