

CALIFORNIA STATE HORSEMEN'S ASSOCIATION, INCORPORATED JUDGE'S RENEWAL FORM

(PLEASE PRINT ALL INFORMTION)

MUST BE POSTMARKED ON OR BEFORE NOVEMBER 30, 2011

NAME			
ADDRESS			
CITY	ZIP	REGION	PHONE()
FAX:		EMAIL:	
PLEASE INDICATE	THE DIVISIONS	THAT YOU ARE	RENEWING.
DRILL TEAM		\$20.00	
ENGLISH		\$20.00	
Your Judges card will State Office. <u>IF</u> you have a CSHA L TOTAL AMOUNT F	ife Membership p	lease check here_	s and fees have been received by the
PLEASE MAKE YOUR CHECK PAYABLE TO CSHA & MAIL TO: CSHA, PO BOX 1228, CLOVIS, CA 93613			
	NOV	EMBER 30, 20	D NO LATER THAN 111 JUDGE'S RENEWAL NOW.
		Office Use Only	
Postiliark Date		Date received	
Check#	Amount		Entered in QB
GL Acct#			-
Membership verified_		Progra	m roster
Member #		ed	

Revised 10-18-11