



# Membership Application

Reference \_\_\_\_\_

Received \_\_\_\_\_

Completed \_\_\_\_\_

What membership status do you desire: (Annual) (Three Year) (Life)

Name: \_\_\_\_\_ Email: \_\_\_\_\_

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

State: \_\_\_\_\_ Country: \_\_\_\_\_

Zip/Routing number: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Please include my spouse for a joint membership: YES NO

Spouse's Name: \_\_\_\_\_

Ranch Name: \_\_\_\_\_

Name as you would like it to appear on certificates: \_\_\_\_\_  
(Examples: John & Sue Smith Rocking R Ranch Equine Unlimited LLC )

What method would you prefer we use to contact you if we have a question about your application?

- E-mail  
 Postal Mail  
 Telephone

Preferred payment method:

- Check/Money order enclosed  
 Invoice me via email

Online Member Area Access

Username: \_\_\_\_\_ Password: \_\_\_\_\_  
(may be changed after first log in)

NQHR will not release any information on this application without your prior consent for any reason to anyone!

I agree if this application is accepted for membership of the National Quarter Horse Registry I will abide by all the rules, regulations, and any amendments made thereto by N.Q.H.R. I understand to violate those rules and regulations will result in my membership being suspended or terminated. I further understand and agree by joining N.Q.H.R. or by purchasing, transferring, filling for registration, or any other service provided by the National Quarter Horse Registry I warrant I will not commence any action whether in law or equity against the National Quarter Registry in any court federal or state.

Signature of primary member: \_\_\_\_\_

Signature of secondary member: \_\_\_\_\_

Submit along with Membership dues to the  
**National Quarter Horse Registry**  
 PO Box 1008 Milford, Utah 84751  
 www.nqhr.org