



ILLINOIS HUNTER & JUMPER ASSOCIATION

2024 IHJA PROFESSIONAL MEMBERSHIP APPLICATION

Mail To: IHJA ■ P.O. Box 250 ■ Gilberts, Illinois 60136 ■ (630) 973-8106 ■ www.ihja.com

**** IMPORTANT NOTICE: MEMBERSHIPS ARE NOT RETROACTIVE ****
Points accumulation for horses and riders begins on date this form is submitted (and fees paid) at horse show office - or received at IHJA office.
***** Trainers are required to be active members for customer points to count *****

Professional Member Name	Stable Name	PRO Show Circuits	USEF # (For A Riders Only)
		(circle one or both) A / B	

Please use a separate sheet of paper for additional horses.

Horses	Complete this section for each Horse to be included in the membership					
	Horse's Show Name (please use USEF name for A circuit horses):					Hunter/Jumper Circuit (circle one) A / B
	LEASED TO (if applicable):	Mare / Gelding / Stallion	Height	Age	Color	USEF # (for A circuit horses)
	Horse's Show Name:					Hunter/Jumper Circuit A / B
	LEASED TO (if applicable):	Mare / Gelding / Stallion	Height	Age	Color	USEF #
	Horse's Show Name:					Hunter/Jumper Circuit A / B
	LEASED TO (if applicable):	Mare / Gelding / Stallion	Height	Age	Color	USEF #
	Horse's Show Name:					Hunter/Jumper Circuit A / B
	LEASED TO (if applicable):	Mare / Gelding / Stallion	Height	Age	Color	USEF #
	Horse's Show Name:					Hunter/Jumper Circuit A / B
	LEASED TO (if applicable):	Mare / Gelding / Stallion	Height	Age	Color	USEF #
	Horse's Show Name:					Hunter/Jumper Circuit A / B
	LEASED TO (if applicable):	Mare / Gelding / Stallion	Height	Age	Color	USEF #

Stable Contact and Mailing Info: Name: _____ Phone: (____) _____
 Address: _____ City _____ St _____ Zip _____
 E-mail address (required for Banquet Invitation): _____

Membership Type: [] \$ 150 Professional Stable (No riders, 3 Horses. Each Additional Horse \$50.00) ___ \$75 Trainer Only (NO Horses)

Name on Credit Card _____ Exp. Date: ____/____/____ Billing Zip Code _____

Credit Card Number _____ Security Code _____

I hereby certify that all information stated above is accurate. I understand that my membership is governed by the current Illinois Hunter and Jumper Association, Inc. Rules and Regulations and I agree to abide by those rules. All credit cards will include a 3% administrative fee. **I UNDERSTAND POINTS ARE NOT RETROACTIVE.**

Signature: _____ Date: _____

OFFICE USE	Date Received: _____ Check #: _____ Amount: _____ IHJA #: _____
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