

OHIO GIRLS BARREL RACING ASSOCIATION
MEMBERSHIP APPLICATION FORM
Website: www.ogbra.com

NAME: _____ BIRTHDATE (Pee Wee): _____

ADDRESS: _____

PHONE: () _____ CIRCLE: PEE WEE SINGLE FAMILY

E-mail ADDRESS: _____

ADDITIONAL FAMILY MEMBERS AND BIRTHDATES (Pee Wee):

_____ Birthdate _____

_____ Birthdate _____

_____ Birthdate _____

_____ Birthdate _____

DUES: Checks payable to "OGBRA"

FAMILY \$35.00 SINGLE \$25.00 PEE WEE \$10.00

Season applied for: _____ (year)

Preferred contact source: (check one) Email _____ Mail _____

Please review www.ogbra.com for up to date news or we will contact you by the above.

It is member's responsibility to notify OGBRA of changes.

I release the OHIO GIRLS BARREL RACING ASSOCIATION from any responsibility if accident, loss, or injury should occur to horse or person(s). All members under 18 require parent or guardian signature.

DATE: _____ AUTHORIZED SIGNATURE: _____

Please send membership form and dues to the O.G.B.R.A. Secretary: **C/O Kelly Joyce**
12980 Ailes Road
Anna, Oh 45302
Phone: (937)441-7885
Email: kellyspetpalace@yahoo.com