

2026 OHHA MEMBERSHIP APPLICATION

(* Fields Required. Please print.)					
*Name					
*Address					
*City	*State	*Zip	*County		
Phone	Cell				
*E-mail					
Note: By supplying your cell number you will be adde	d to the valuable OHHA	Informational Te	xt Blast. Std. msg & data rat	es apply.	-out.
Active \$65 *Please check one: Owner	□Driver/Trainer	□Breeder □	Groom □Farm Hand		
Associate \$25 (All Memberships include OHHA pub	olicationsquarterly BHH ma	agazines, Sires Stakes p	ublication, Stallion Directory, e-n	ewslettersand entrance to OF	FRC fairs.)
*USTA#*Date of Birth					
Check if you would like to be included in the Carm. Please note your listing as Public Trainer o					
consent to us providing any supplied information	n online in Our Resou	ırce Guide. Your	online listing will provid	le the address and cont	tact information
provided in this form for Membership. If you wo			•	1	
Full Active Membership includes free sulky coverage up to \$2,5					
nd sulkies must be registered. Stables/Business Entities require	an Associate Membership.	. All affiliates of any S	stable/Business Entity must be f	uii active members. Full deta	uis at ohha.com/insuranc

Return Form and payment to 2237 Sonora Drive, Grove City, Ohio 43123 or send via e-mail to info@ohha.com