



2024 OHHA MEMBERSHIP RENEWAL

Member ID # _____

(* Fields Required. Please print.)

*Name _____

*Address _____

*City _____ *State _____ *Zip _____ *County _____

*Phone _____ *Cell _____

*E-mail _____

Note: By supplying your mobile or cell phone number you will be added to the OHHA Informational Text Blast. Std. msg & data rates apply. Approx. 5 msg /month.

Active \$65 ____ Associate \$25 ____ Check here if you were a member the previous year ____

*Please check one: Owner Driver/Trainer Breeder Groom Farm Hand

*USTA# _____ *Date of Birth _____

*Check if you would like to be included in the OHHA Resource Guide and advertise your business on the OHHA Website as a public trainer or public farm.

Please note your listing as Public Trainer or Farm and any added detail you want included in the resource guide. By completing this section, you are consenting to us providing any supplied information online in Our Resource Guide. Your online listing will provide the address and contact information provided in this form for Membership. If you would like to have different information provided, or have other instructions, please include that here: _____

Full Active Membership includes free sulky coverage up to \$2,500 (wheels & discs excluded). NOTE: The sulky owner(s), driver, trainer & all owners of the horse involved must be OHHA members and sulkies must be registered. Stables/Business Entities require an Associate Membership. All affiliates of any Stable/Business Entity must be full active members. Full details at ohha.com/insurance