



IOWA
HARNESS HORSEMEN'S ASSOCIATION

2017 Membership Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____ Cell Phone: _____

PAC Contribution (optional) \$15 x _____ = _____

Membership Dues \$15 x _____ = _____

Total = _____

Iowa Harness Horsemen's Association PAC Authorization

I hereby authorize the IaHHA to deduct \$50.00 from the purse earnings of any horse that I own who wins a race with a purse of more than \$3,000.00 at any IaHHA sponsored race.

Signature: _____

Please return completed membership forms with payment to:

Gretchen Springer
IaHHA Executive Secretary
12816 Vale Blvd
Floris, IA 52560

For office use only

Payment method: Cash _____ Check/Number _____ Date Paid _____