MEMBERSHIP APPLICATION 2019

LOUISIANA STATE HORSESHOE PITCHERS ASSOCIATION AND

NATIONAL HORSESHOE PITCHERS ASSOCIATION (INCLUDES LIABILITY INSURANCE)

NAME		
ADDRESS		
CITY	STATE	ZIP
PHONE ()	DATE OF BI	IRTH / /
OCCUPATION		
E-Mail +		
+ E-Mail Address is required bulletins.	to receive Newsline by E-Mail	l and other LSHPA and NHPA n
How many years have you been an	L.S.H.P.A. member?	
Last years N.H.P.A. card number		
(National \$23.00Ins (Jr./Cadet: National \$3.00 Provisional: Natio	l) year State & Natio urance \$2.00State \$5.00) Insurance \$2.00—State \$ onal \$10.0State \$5.00 ship No Fees; Only eligi	Total \$30.00 22.00) Total \$7.00 Total \$15.00
CATEGORY: (Circle one) M	W E B G	C P T
Total Amount Sent with this app	olication:	
Please designate which club or area	a in which you wish to be inclu	ıded.
Bayou HPA , Cajun HP	A , Harahan I	HPA,
NE HPA , Shi	reveport-HPA ,	
Your Make/Style of Horsesl	hoe	

Please include check or money order payable to L.S.H.P.A. and mail to:

L.S.H.P.A.
% Al Dodson
811 Susan Drive
Morgan City, La. 70380
allinda67@gmail.com