MEMBERSHIP APPLICATION 2020

LOUISIANA STATE HORSESHOE PITCHERS ASSOCIATION AND

NATIONAL HORSESHOE PITCHERS ASSOCIATION (INCLUDES LIABILITY INSURANCE)

NAME				
ADDRESS				
CITY	ST	ATE	ZIP	
PHONE ()	DA	TE OF BI	RTH	/ /
OCCUPATION				
E-Mail +				
+ E-Mail Address is require bulletins.	ed to receive News	sline by E-Mail	and other	LSHPA and NHPA n
How many years have you been a	n L.S.H.P.A. men	aber?		
Last years N.H.P.A. card numbe	r			
(National \$23.00Ir (Jr./Cadet: National \$3.0 Provisional: Nat	00Insurance \$	State \$5.00) 2.00—State \$ tate \$5.00	2.00) <u> </u>	Total \$30.00 Total \$7.00 otal \$15.00
CATEGORY: (Circle one) M	W E	B G	C I	<u> </u>
Total Amount Sent with this a	pplication:			
Please designate which club or ar	ea in which you v	vish to be inclu	ıded.	
Bayou HPA , Cajun H	PA .	, Harahan I	HPA,	
NE HPA , S	hreveport-HPA	•		
Your Make/Style of Horse				

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