MEMBERSHIP APPLICATION 2023

LOUISIANA STATE HORSESHOE PITCHERS' ASSOCIATION
AND
NATIONAL HORSESHOE PITCHERS' ASSOCIATION
(INCLUDES LIABILITY INSURANCE)

NAME _____

ADDRESS _____

CITY _____ **STATE** _____ **ZIP** _____

PHONE ( ) _____ **DATE OF BIRTH** / / _____

E-Mail _____

Last years N.H.P.A. card number _____

How many years have you been an L.S.H.P.A. member? _____

One (1) year State & National Dues

(National $23.00----Insurance $2.00----State $5.00) _____ **Total $30.00**

(Jr./Cadet: National $3.00---Insurance $2.00—State $2.00) _____ **Total $7.00**

Provisional: National $10.0----State $5.00 _____ **Total $15.00**

Trial Membership------ No Fees; Only eligible for one event

Total Amount Sent with this application: _____

CATEGORY: (Circle one) M W E B G C P T

Please designate which club or area in which you wish to be included.

Bayou HPA _____ **Cajun HPA** _____ **Harahan HPA** _____

NE HPA _____ **Shreveport HPA** _____

(Shirts are For New Members only)

Shirt Size S M L XL XXL XXXL Color White Gray Orange Pink Navy Blue
Safety Yellow Golden Yellow Purple

Your Make/Style of Horseshoe _____

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