

MEMBERSHIP APPLICATION

Kansas Horseshoe Pitchers Association
National Horseshoe Pitchers Association

The NHPA card is a combination membership of the state and the national horseshoe pitching associations. This card entitles you to participate in NHPA sanctioned play throughout the United States and much of Canada, where ever you meet the requirements of the event. You must pay your dues through the state charter where you maintain legal residence as determined by voting, tax and/or drivers license laws.

Dues are based on the calendar year. New Members may pay next years dues after Oct. 1st of the current year and will be eligible to participate in sanctioned events for the final 3 months of the current year, as well as all of the next year. As a member of the Kansas Charter, you will receive newsletters and a schedule of all sanctioned and some non-sanctioned tournaments for the state.

Your pitching stats from all sanctioned events will be forwarded to the NHPA stats headquarters called NatStats. These stats are updated weekly and can be accessed through the NHPA website. To make all this possible, your NHPA card will have six digits followed by two decimals. Kansas is region 18, followed by four digits, which is your membership number. The two decimals represent the calendar year. The decimal and color of the NHPA card change each year. Your membership number will remain with you as long as you reside in Kansas and continue to maintain your membership. If you ever lose your NHPA card, the charter secretary will issue you a duplicate card free of charge. You need only notify the Sec./Treas.

Please fill in all information on the form below that applies to you and mail along with total amount of dues to the KHPA Sec./Treas. (address below) Please make checks payable to: KHPA

Susan Fulton
KHPA Sec./Treas.
1407 SW Fairlawn RD
Topeka, KS 66604
Phone: (785) 845-4573
E-mail: slhainline@gmail.com

ADULT DUES
17.00 National
8.00 State
\$25.00 Total

JUNIORS & CADETS
5.00 National
2.00 State
\$7.00 Total

(Cut along line and return this portion with dues)

Name: _____ Phone: _____ - _____ - _____

Address: _____ Date of birth: ___/___/___

City: _____,KS Zip: _____ E-Mail: _____

NHPA# _____ Approx. yrs. in NHPA _____ New Members Check _____

Check one of the following: **Adult** _____, **Junior** _____ (18 and under for the entire calendar year), **Cadet** _____ (12 and under for the entire calendar year)

Check one of the following: Male _____, Female _____

Check one of the following: 40' pitcher _____, Less than 40' pitcher _____