



Application for Track Membership

County Fair/Qualifying Tracks – Due April 3, 2019

TRACK INFORMATION

Name of Organization: _____

Facility Address (Street, City, State, Zip): _____

Race Dates and Post Times: _____

Will Track Require Declaration Blanks? N ___ Y ___ If Yes, how many Trot? _____ Pace? _____ (reminder, 50 blanks to a pack)

Race Office/Entry Phone Number: (____) _____

CORRESPONDING OFFICER

Name of Corresponding Officer: _____

Address (Street, City, State, Zip): _____

Corresponding Officer Phone: (____) _____ Email Address: _____

RACE OFFICIALS

Speed Superintendent: _____

Presiding Judge: _____ Starter: _____

Charter: _____ Photo Finish: _____

Person who sends entries/results to USTA (Clerk): _____

SIGNATURE

Application is hereby made for Membership to The United States Trotting Association subject to all the provisions of the Bylaws, Rules & Regulations of the Association and agreeing to abide by and observe all such provisions. It is further agreed that the applicant will not refuse or attempt to refuse a decision or determination of this Association in any jurisdiction other than that provided by Section 7 of Article 1 of the Bylaws.

Signature of person applying for renewal _____ Date _____

PAYMENT INFORMATION

Please do not send cash; total to be remitted in U.S. funds **TOTAL AMOUNT ENCLOSED \$ 80**

Payment Method: Check/Money Order Visa/MasterCard/Amex Name as it appears on card: _____

Complete only if paying by credit card (U.S. dollars only):

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 CVV Code

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Expiration Date: ____/____/____ Signature: _____

MAIL TO: U.S. Trotting Association, 6130 S. Sunbury Rd., Westerville, OH 43081-9309
Call Toll Free: 877-800-8782 | Local: 614-224-2291 | Fax: 844-229-1338 | www.ustrotting.com