



Application for Track Membership

County Fair/Qualifying Tracks — Due April 5, 2024

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 (Fee for track membership is \$80)

Please do not send cash. Pay by check, money order or credit card in U.S. funds only.

Payment Method: Check Money order Visa/MasterCard Name as appears on card: _____

Complete only if paying by credit card:

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 CVV Code

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Expiration date: ____/____/____ Signature: _____



U.S. Trotting Association
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www.ustrotting.com

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