

Oregon Barrel Racing Association

2024-2025 MEMBERSHIP APPLICATION



Name: _____ Date: _____

Address: _____ City: _____ State: _____

Zip: _____ Phone: _____ Email: _____

Emergency Contact Name & Number: _____

Any person becoming a member of the association shall comply with all of its rules, by-laws, decisions and bound by the same. Only members in good standing shall be eligible to participate in the activities of OBRA and shall be eligible to receive any awards or benefits sanctioned by the rules of the OBRA. The OBRA does not discriminate against sex, race, creed or religion. As a member of the OBRA, I hereby agree to hold harmless and assume the risk of any injury to myself, property and every minor person who accompanies me to an OBRA sponsored or co-sponsored event. Furthermore, I will hold harmless each equine activity sponsor from any claim of injury or damage that could be sustained by me, my property and every minor person who accompanies me to an OBRA sponsored or co-approved event.

SIGNED: _____ DATE: _____

(If under 18 years of age, application must be signed by a parent or guardian)

<p>Yearly Membership Fee \$60.00 _____</p> <p>Horse Nomination Fee:</p> <p> <i>Open</i> \$25.00 _____</p> <p> 4D \$25.00 _____</p> <p>LTE's _____ \$3500 Novice \$25.00 _____</p> <p>LTE's _____ \$1000 Novice \$25.00 _____</p> <p>LTE's _____ Rookie \$25.00 _____</p> <p><i>(To be eligible for Rookie, rider must be a 1st year OBRA member with less than \$1,000.00 lifetime earnings (LTE's) as of the date of nomination.)</i></p> <p>Total Fees: _____</p> <p>NEW RULES:</p> <ul style="list-style-type: none">• The Class you nominate into is where you will run all year. A 1000 novice Horse must run in the class according to Lifetime earnings. See Rule book.. Cant run in 1000 class if there is a lower class that your eligible for.• Send a picture of registration papers with in 30 days of nomination for classes: Open, 3500 & 1000 Classes Only	<p>HORSE INFORMATION:</p> <p>Horse's Registered Name: _____</p> <p>Horse's Barn name: _____</p> <p>Horse's Date of Birth: _____</p> <p>PREVIOUS OWNER'S INFORMATION:</p> <p>Name: _____</p> <p>Address: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Phone: _____</p> <p>If you are nominating to a Novice Class, you must declare your novice horse's LTE's: \$ _____</p> <p>Coat Size: _____ Horse Blanket Size: _____</p>
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I swear that the above named dollar amount won for lifetime earnings at the time of nomination is correct. I grant OREGON BARREL RACING ASSOCIATION permission to verify these winnings if deemed necessary. If proven to be intentionally falsified, the above horse shall be dropped from the year end standings.

SIGNED: _____

DATE: _____

Mail, Email or Text this form and fees to the OBRA Secretary/Treasurer:

Date Received: _____

Marie Ellis | 15761 S. Gilchrist Road, Mulino, OR 97042 | Cell: 503.515.8442

Email: Secretary@OregonBarrelRacing.com