



2020 HBHA Membership Form

Heartland Buckskin Horse Association Membership Application
(International Buckskin Horse affiliate)

Circle One

Family \$25
Family Lifetime \$75

Name: _____

Spouse: _____

Children: _____

Single Year: \$15
Single Lifetime: \$45

Name: _____

Name: _____

Youth: \$5

Name: _____

Address: _____

Email: _____

Phone: _____

Please makes payable to HBHA and send to:

Niome Zeisneiss
18612 670th Ave
Nevada IA 50201