



Application for Associate Membership in the U.S. Harness Writers' Association

Please print, fill out and send with \$40 check or money order for annual dues to:

**U.S. Harness Writers' Association
Box 1314
Mechanicsburg PA 17055**

Name: _____

Affiliation: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Date: _____ Signature: _____

-For office use only

For Chapter Approval:

Date Submitted:

Date Approved:

National Approval:

Date Submitted:

Date Approved: