



### Member Information

Name: \_\_\_\_\_

Farm/Stable/Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Fax: \_\_\_\_\_

Are you a current subscriber to *BloodHorse* magazine? ☐ Yes ☐ No

### Member Demographic Information

In an effort to learn more about our members, please complete the following information:

Occupation: \_\_\_\_\_

Gender: ☐ Male ☐ Female Age: ☐ Under 21 ☐ 21-30 ☐ 31-40 ☐ 41-50 ☐ 51-60 ☐ 61-70 ☐ Over 70

Involvement in Thoroughbreds: ☐ New owner or breeder ☐ Established owner or breeder ☐ Not an owner or breeder

### Annual Dues

☐ **INDIVIDUAL, \$125 U.S. (\$150 Savings, Special Introductory Rate);** one-year tablet/digital edition subscriptions to *BloodHorse*, one membership card and tablet/digital edition of *The Horse* magazines. TOBA members' pin for free admission to 60 racetracks throughout North America and Canada, including Assiniboia Downs and Woodbine, free clubhouse admission to many racetracks, our monthly e-newsletter and discounts on industry-related goods and services

Initiate your membership online visit: [www.TOBA.org/membership](http://www.TOBA.org/membership)

Select Membership Level: CTHS: \$125 U.S.

Would you like to donate to the Thoroughbred Charities of America?

☐ Donate \$10 ☐ Donate \$25 ☐ Donate \$50 ☐ Donate \$100 ☐ Other Amount: \$\_\_\_\_\_ ☐ No thanks

### Payment Information

Credit Card: ☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Name on Card: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Card Number: \_\_\_\_\_ CVV Code\*\*: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Contributions or gifts to TOBA are not tax deductible as charitable contributions. Dues may be tax deductible as an ordinary and necessary business expense. \*Annual TOBA dues include \$10 for each *BloodHorse* subscription. \*\*Three-digit number that appears on the back of your Visa, MasterCard or Discover; or four-digit number that appears on the front of your AMEX.

Send Application To:

Mail: TOBA, P.O. Box 910668, Lexington, KY 40591-0668 USA

Fax: (859) 276-2462

Apply Online: [www.toba.org](http://www.toba.org)

Phone: (859) 276-3897

Select Membership Level: **CTHS \$125 U.S.**

Email: [Lmonnet@toba.org](mailto:Lmonnet@toba.org)