

TEMPORARY MEMBERSHIP CARD

NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

JOINED AT _____ DATE _____

Show Name

SIGNED _____

Show Secretary

SIGNED _____

Show Steward

Needs to be signed by both the Secretary and the Steward.
Expires in 45 days. If you have not received your membership card, call the RIHA OFFICE.

Copy to RIHA OFFICE, SHOW SECRETARY, MEMBER

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