

## RUSH REQUEST WORKSHEET

Form to accompany applications for membership, Non Pro, competition license, etc.

Email: memberships@nrha.com

## Please Check One:

- □ Same-Day Rush: \$60
  - Must be received by 3 p.m. to guarantee same-day service
- □ 3-Day Rush: \$40

List all documents to be rushed, no more than 6 memberships and/or licenses per rush:

| 1)                             |                                 |                              |                      |                          |                     |                                  |         |
|--------------------------------|---------------------------------|------------------------------|----------------------|--------------------------|---------------------|----------------------------------|---------|
|                                |                                 |                              |                      |                          |                     |                                  |         |
|                                |                                 |                              |                      |                          |                     |                                  |         |
|                                |                                 |                              |                      |                          |                     |                                  |         |
|                                |                                 |                              |                      |                          |                     |                                  |         |
|                                |                                 |                              |                      |                          |                     |                                  |         |
| Contact num                    | ber in case of qu               | iestions:                    |                      |                          |                     |                                  |         |
| EMAIL confir                   | mation to:                      |                              |                      |                          |                     |                                  |         |
|                                | onfirmation wh<br>membership ca |                              |                      |                          |                     | quested above.<br>r postal mail. |         |
| PAYMENT                        | □ Check or money c              | r <b>der</b> (in U.S. funds) | □ Visa               | Discover                 | □ MasterCard        | □ American Expres                | S       |
| Card #                         | d #                             |                              |                      | Expiration Date (MM//YY) |                     |                                  |         |
| Cardholder Name (Please print) |                                 |                              | Cardholder Signature |                          |                     |                                  |         |
|                                | MAIL: NRHA, 3021 W.             | Reno Avenue, Oklahon         | na City, Oklar       | 10ma 73107 ~             | EMAIL: memberships@ | @nrha.com                        |         |
|                                |                                 | FO                           | ROFFICE              | USE ONLY                 |                     |                                  | Rev. 11 |
| Date Received                  |                                 |                              |                      |                          |                     |                                  |         |