

2008 Amateur & Novice Amateur Card Application



American Paint Horse Association

P.O. Box 961023 • Fort Worth, Texas 76161-0023
(817) 834-APHA (2742), ext. 447 • Fax (817) 222-8489
www.apha.com/amateur • amateur@apha.com

See Rule AM-205 for Novice Amateur Eligibility

COMPLETE APPLICATION IN FULL.
Omitting information will delay processing.

A. *Please note: Applicants are not eligible for the Amateur Program until the age of 19 (unless proof of marriage is provided) as of January 1, 2008.

Last Name: _____ First Name: _____ Middle Initial: _____

APHA Amateur ID # (if known): _____ Birth Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

E-mail: _____

Indicate Age Group: 19-44 years - Classic 45 years and older - Masters

I am applying for: Amateur Card Novice/Amateur Card (includes both divisions) *NOVICES MUST COMPLETE SECTION C
If neither option is checked, an Amateur-Only Card will be issued.

Your Occupation: _____

If occupation is horse-related, please explain: _____

Spouse's name (if applicable): _____ Spouse's occupation (if horse-related): _____
See Rules AM-010.A.2.b and AM-020.A.3

Name of horse(s) to be exhibited: _____

Owner of Horse(s): _____

Relationship to owner or joint owner: _____
See Rule AM-020

B. STATEMENT OF ELIGIBILITY *Please carefully read and answer the following questions to ensure you meet APHA's Amateur eligibility requirements.*

- Have you accepted payment, directly or indirectly, for riding, training, exhibiting, schooling or driving horse(s) at any time during the past five years (60 months)? YES NO
- Have you instructed another person, or conducted a seminar in riding, driving, training or showing a horse at any time during the past five years (60 months) for payment? YES NO
- Have you shown, trained, or assisted in the training of a horse for which your spouse, at the time, accepted any form of payment, either directly or indirectly, for training, assisting in training, or showing of said horse(s) any time during the past 5 years (60 months)? YES NO
- Have any of your expenses (including but not limited to lodging, transportation, mileage, etc.) been paid by someone else other than family members as listed in rule AM-020? YES NO
- Are you now, or have you ever been approved as a horse show judge by any breed or show association? YES NO
- Have you judged any horse shows, Open, 4-H, or approved breed shows during the past five years (60 months) for payment? YES NO

If you have answered "Yes" to any of the questions listed above, please explain (use additional paper if necessary): _____

C. NOVICE APPLICANTS must complete the following:

- 1) Have you ever shown and earned points in any recognized equine association? Yes No
 - 2) **If yes, please circle all that apply:** APHA, AQHA, POA, PtHA, ApHC, IBHA, PHBA, AHA, AMHA, ABRA, NCHA, NRHA, NRCHA, NSBA, NBHA, USEF, Other: _____
 - 3) Have you won a World or Reserve World title with any association? Yes No
If so, please list all titles won, including class: _____
 - 4) On the table below, please list **ALL lifetime performance points and money** you earned with each horse from **other** equine associations, as well as any **APHA Open** points that you have earned. Attach an additional sheet if necessary.
- **APHA Youth, Amateur and Novice Amateur points do not need to be listed. Therefore, if only APHA Youth, Amateur and Novice Amateur points have been earned, please state: "Youth/Amateur/Novice points only". If no points or money have been earned, please state: "None Earned".**

Horse Name	Breed	Registration #	Date Last Shown	Class	Points Earned	Money Earned

Were you paid a fee for exhibiting said horse(s) during the past 60 months? Yes No

If yes, state name and relationship to person making payment: _____

Please list all names that you have earned points under (maiden name, married name, etc.): _____

D. ALL APPLICANTS MUST SIGN

In submitting this application for status in the APHA Amateur Exhibitor Program, I affirm that the information contained herein is true and correct. I understand that my status in the APHA Amateur Program and my APHA Amateur or Novice Amateur card is revocable. Should the Association find that, for any reason, I am no longer eligible to compete in APHA-approved Amateur or Novice Amateur classes, I agree to surrender said card to the Association immediately upon request. Furthermore, should I, for any reason, become ineligible to compete as an Amateur or Novice Amateur, I will refrain from exhibiting in the corresponding classes, and I agree to voluntarily surrender my APHA Amateur or Novice Amateur card to the Association without request. Failing to do so, I am subject to possible disciplinary action under the Association's general rules. By signing this application for Amateur status, I acknowledge responsibility for knowledge of APHA rules regarding the Amateur program.

Signature of Applicant: _____ **Date:** _____

Note: APHA reserves the right to check all breed registries or equine associations for points earned. A change in status from Amateur to Novice Amateur will require the applicant to complete the Novice section above.

Fees: Fees are payable in U.S. funds only and must accompany application. Normal processing time is approximately 3-4 weeks. Letters will be sent for incomplete applications requesting additional information. If no response from applicant upon deadline date, an office charge will be kept and any remaining credit will be refunded. You may then reapply.

Amateur cards expire on December 31, of the year issued.

All exhibitors must be current APHA members in order to be eligible to show.

- Amateur or Novice Amateur Card (Must be a current APHA Member)** **\$15** _____
 - Amateur or Novice Amateur Card and APHA Membership** **\$50** _____
 - Please fax my new card** Fax No.: _____ **\$5** _____
 - Additional Rush Fee Processed within 7-10 business days if application is complete and correct. Need card by:** _____ **\$25** _____
- Note: This date is not guaranteed. Does not include fax fee.

TOTAL AMOUNT DUE **\$** _____

Check or Money Order enclosed or charge to my **VISA** or **MasterCard** Complete credit card information below:
If you pay by check, your check may be converted into an electronic funds transfer.

Credit Card Number: _____ Expiration Date: _____

Name on Card: _____ Signature: _____

Return this form to:

American Paint Horse Association
 Attn: Director of Amateur Activities
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