

AQH YA

AMERICAN QUARTER HORSE
YOUTH ASSOCIATION

Youth Day at the Races

This form must be completed and emailed/mailed to AQHYA if you are hosting an AQHYA Youth Day at the Races and/or would like a youth to be part of the Youth Racing Experience at the Challenge Championships.

Affiliate: _____

Organizer's Information:

Name: _____

Email: _____

Phone Number: _____

Address: _____

Event Information:

Date: _____

Location: _____

Capacity: _____

Cost to Attend: _____

Tentative Agenda: _____

The Organizer may select one youth who participates at your Youth Day at the Races to go to the AQHYA Youth Racing Experience. Other youth may apply as "At-Large Participants."

You must email or mail us the name by August 30, 2008!

AQH YA

Attention: Kayce Wagner

PO Box 200

Amarillo, TX 79118

kwagner@aqha.org

806-378-4332

AQHYA RACING EXPERIENCE

Applications must be received at AQHA by August 15 if you are an at large participant. Racing affiliates may send one youth representative from their regional race experience; their applications are due by August 30.

Applicants must be at least 14 years of age by January 1st of the race year.

Please print and fill this form out completely. Attach additional pages as necessary and return with a color photograph (suggested for use in promotion). The essay written by the applicant is required. The overall quality of your application will be taken into consideration.

Name: _____ AQHYA ID#: _____

Address: _____ E-mail: _____

City, State, Zip: _____

Telephone #: _____ Fax: #: _____

Name of parent(s) or guardian(s): _____

Gender: _____ Birth date: _____ Age: _____

Are you a member of affiliate or regional Quarter Horse Youth Associations? Yes___ No___

If yes, list which ones: _____

If yes, do you hold an affiliate or regional Quarter Horse Youth Association Office? Yes___ No___

If yes, list which ones: _____

List all organizations you are a member of: _____

Hobbies and interests: _____

List your past experience(s) involving horses (i.e. ridden since you were 3, etc.):

Future plans or career goals:

Check any AQHYA Programs that you have been involved in.

Horseback Riding Program Leadership Conference/AQHYA Convention

STAR Program Wrangler All STAR Team Member

Speech Contests Horse Bowl Contest

Talent Contest Scrapbook Contest

Photo Contest Art Contest

Other _____ Judging Contest

AQHYA Regional Race Experience held at _____ (Location)

Are any of your family members involved in American Quarter Horse racing? Yes___ No___

If yes, in what capacity? Please check all that apply.

Trainer Breeder Owner Jockey Racetrack employee

Other (please explain) _____

List any previous knowledge of or experience you have in the horse racing industry:

Attach a **typed, double-spaced essay no longer than 500 words** in length explaining why you are interested in American Quarter Horse Racing and why you should be selected to participate in this program.

Parental or Guardian Indemnity and Release:

I/we do hereby request that my/our son/daughter/ward, _____, be allowed to participate in the AQHYA Championship Experience, which is purely voluntary on the part of the minor and ourselves. As an express condition by AQHA for such participation, without which the minor will not be allowed to participate, I/we, and each of us, jointly and severally, hereby agree to indemnify and hold harmless AQHA, AQHYA, track management, and all persons officially connected with the AQHYA Championship Experience, from any and all liability of every kind and character, including, but not limited to, bodily injury or property damage sustained by the minor or ourselves while participating in or being in attendance at this activity.

I/we further release these indemnities from all claims above stated as I/we, or either of us, have individually or as parents or legal guardian for the minor's benefit, or that the subrogee of ourselves and the minor may have.

I/we further agree that I/we do hereby authorize the use of any pictures, still or video, which might be taken for advertising by corporate partners, and if selected by AQHA for use in promotion and advertising of the AQHYA Youth Racing Experience and/or American Quarter Horse racing.

Signature of Parent or legal guardian: _____

Date: _____

If legal guardian, court-issued documentation must accompany entry if not already on file with AQHA. The undersigned does hereby agree to abide by and be governed by all rules and regulations of the American Quarter Horse Association as outlined in the Official Handbook and Conduct & Behavior Policies.

Signature of Participant: _____

Date: _____

DEADLINE: AUGUST 15(August 30th for the Regional Race Representative):

SEND TO: AQHYA

ATTN: KAYCE WAGNER/SARAH SMIDDY

1600 Quarter Horse Dr.

Amarillo, TX 79104

PHONE: (806) 378-4342, FAX: (806) 349-6409

Upon acceptance you will receive a workbook that must be completed and postmarked by October 1st. Thank you for your interest in Quarter Horse Racing and GOOD LUCK!!!