

Name

Phone (preferred number to be listed on the website)

Address

Phone (this is a second number if needed)

City

State

Zip

Website address (if available)

Country

Email address (if available)

AQHA Identification Number

Other AQHA ID numbers you may have

Must maintain individual, current-year membership

MISSION STATEMENT

To enhance and promote industry professionals of the American Quarter Horse Association as the premier purveyors of equine services. The association serves to foster credibility, proficiency and advocacy, through the endorsement of superior industry standards that will enable professionals to excel in a sustainable career.

- Membership in AQHA Professional Horsemen is a privilege, not a right, subject to continual review of the Professional Horsemen's Council and/or the Executive Committee. Membership in the Professional Horsemen may be terminated by the Professional Horsemen's Council and/or the Executive Committee with or without notice and formal hearing.
- By becoming a member of AQHA Professional Horsemen, such member understands that the equine industry and clients expect a higher standard of conduct. As such, member understands and agrees that AQHA has the right to investigate complaint(s) regarding a member's alleged conduct. Further, such member must cooperate in the investigation and abide by decisions concerning application approval and revocation of membership.
- The undersigned does hereby waive any right he/she may have to require disclosure to him/her by AQHA of any information obtained to evaluate him/her as a Professional Horseman, agreeing that the accuracy of information concerning the undersigned's character, reputation and horsemanship abilities is paramount to his/her disclosure rights, if any.

Applicant's Signature: _____ Date: _____

AQHA Professional Horsemen Code of Ethics

We, the members of the American Quarter Horse Association of Professional Horsemen in carrying out our role of providing service to the American Quarter Horse industry, recognize the need to do so in a professional manner, and to deal with the public and our colleagues with the highest degree of integrity. Therefore, we have set forth the following creed which shall govern our endeavors to fulfill our obligations:

- To adhere to the professional standards of the American Quarter Horse Association and to work to further its goals and objectives.
- To ensure that the welfare of the American Quarter Horse is paramount and that every American Quarter Horse shall at all times be treated humanely and with dignity, respect and compassion.
- To abide by stringent rules established and enforced by AQHA demanding that American Quarter Horse breeders, owners, trainers, exhibitors, show officials, judges and professional horsemen are continually responsible for the wellbeing and humane treatment of any American Quarter Horse entrusted to their care. These rules include, but are not limited to, prohibited training practices, prohibited surgical procedure, prohibited chemical administration, or prohibited devices that could affect a horse's performance or alter the horse's natural conformation. Such rules further include compliance of all medication policies.
- To conduct all business affairs with integrity, sincerity and accuracy in an open and forthright manner.
- To act with integrity in financial dealings with clients, other professionals and the public. In this regard, any horse shown by my spouse, client or child will be owned as prescribed by applicable rules.
- To fully disclose to customers the actual sales price and commissions involved in the sale or purchase of a horse.
- To not charge or receive a monetary commission, or other remuneration constituting a commission from both the buyer and seller of a horse.
- To handle our business, operations and communications (including those through social media) in a manner that promotes the positive image of the American Quarter Horse industry.
- To instill confidence among clients and the public in the American Quarter Horse industry, avoiding any action conducive to discrediting it or membership in the American Quarter Horse Association.
- To show respect, courtesy, and decency towards fellow AQHA Professional Horsemen at all times by upholding the highest standards of professional ethics and mutual civility regardless of circumstances.
- To create a supportive culture that builds and maintains a collaborative relationship with all AQHA Professional Horsemen.

By signing this application, I agree to be bound by the rules of application and the Code of Ethics of the Association of AQHA Professional Horsemen. I understand that in order to participate in this program, I must maintain a continuous individual membership with AQHA.

Applicant's Signature: _____ Date: _____

AQHA Professional Horsemen Application Reference Letter

MAILING ADDRESS: P.O. BOX 200, AMARILLO, TX 79168
WWW.AQHA.COM • © 806-376-4811

Applicant's Name:

Applicant's Residence:

The American Quarter Horse Association of Professional Horsemen was developed to bring the highest level of integrity to the American Quarter Horse industry. Today, the Association of Professional Horsemen comprises members who are committed to preserving the American Quarter Horse industry, assisting people involved with American Quarter Horses and improving equine activities through a united voice. Membership is reserved for members of AQHA and offered to trainers and other individuals who work with the equine athlete.

I, the undersigned, understand the above-named individual is applying for membership in the American Quarter Horse Association of Professional Horsemen. I am aware of the seriousness of this position and that being a member of the AQHA Professional Horsemen requires integrity, professionalism and sincerity. With this in mind, I submit the following information regarding this applicant.

(Please check the appropriate circle and make comments in the larger box below)

Approve (explain please)

Disapprove (explain please)

Professional Horseman

AQHA Director

Client

Other

Reference Name:

Reference Signature:

**THIS IS A CONFIDENTIAL REPORT, PLEASE RETURN TO:
KMCCUISTION@AQHA.ORG OR BY MAIL TO:**

**AQHA
ATTN: KAREN MCCUISTION
PO BOX 200
AMARILLO, TEXAS 79168**

PLEASE RETURN THIS REPORT PROMPTLY, AS WE CANNOT PROCESS THE APPLICANT'S MEMBERSHIP UNTIL ALL INFORMATION IS RECEIVED.