



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 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 economically 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.

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: _____

YEARS OF OPERATION:

Years as a trainer: Years as a riding instructor: Years as a breeder: Years as a jockey: Years at current location:

Two sets of two-digit boxes for each category: Years as a trainer, Years as a riding instructor, Years as a breeder, Years as a jockey, and Years at current location.

If less than two years, list previous location:

A long horizontal row of 20 small boxes for listing a previous location.

Address

A long horizontal row of 20 small boxes for the address.

City

State

Zip

MEMBERSHIPS:

- Radio button options for various associations: AQHA Affiliate, National Barrel Horse Association, National Reining Horse Association, National Thoroughbred Racing Association, Other Associations, AQHA Racing Affiliate, National Cutting Horse Association, National Snaffle Bit Association, U.S. Dressage Federation, USA Equestrian Inc., National Reined Cow Horse Association, Professional Rodeo Cowboys Association, Women's Professional Rodeo Association, World Conformation Horse Association.

JUDGES CARD(S) HELD:

- Radio button options for various associations: American Quarter Horse Association, American Paint Horse Association, International Buckskin Horse Association, National Snaffle Bit Association, Pony of the Americas Club, US Equestrian Federation, Appaloosa Horse Club, Inc., National Cutting Horse Association, Palomino Horse Breeders of America, National Reined Cow Horse Association, American Miniature Horse Registry, Canadian Equestrian Federation, National Reining Horse Association, Pinto Horse Association, World Conformation Horse Association.

REFERENCES: References are required from two current AQHA Professional Horsemen, two clients and a National Director. These references will be contacted by AQHA.

AQHA Professional Horseman

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

AQHA Professional Horseman

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

Client Reference

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

Client Reference

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

AQHA National Director

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email: _____

SERVICES OFFERED: (fill in all that apply)

- Radio button options for services: Conditioning for sales, Race Trainer, Frozen/Cooled Semen, Racing Challenge Nominated, Horse Shoeing, Other, Boarding/Layups, Breaking, Embryo Transfer, Mare care/Foaling services, Professional Jockey, Horse Auctions/Sales, Stallion Services, Exercise Rider.

TRAINING:

- Radio button options for training types: Show (Youth, Amateur, Open), Western (Rail, Cow horse, Versatility Ranch Horse), English (Rail, Fences), Racing (Training Center, Race Track), Lessons (Beginning, Intermediate, Advanced Horsemanship, Handicapped Riding).

Do you have lesson horses available: Yes No

Are you a member of a Trainer/Instructor Certification Program? Yes No

If yes, please list the programs: _____

Other services (please specify): _____

HORSE SALE REFERRAL:

Do you want to be referred for horse sales? Yes No

If yes, you must complete the financial information below and abide by the following statement:

As an expressed condition to referral of potential customers by AQHA, the undersigned agrees not to charge or receive a monetary commission, or other remuneration constituting a commission from both the buyer and seller of a horse involved in the transaction in which the undersigned is representing a client in the purchase or sale thereof.

The undersigned agrees the violation of this expressed condition constitutes a violation of the Code of Conduct requiring integrity in financial dealings with clients, other professionals and the public, and shall be grounds for removal from membership in the Association of AQHA Professional Horsemen.

How do you market your horses? (fill in all that apply)

Private Treaty Public Sales Production Sales

Price range of horses for sale: (fill in all that apply)

\$5,000 or under \$5,001 – \$10,000 \$10,001 – \$25,000 more than \$25,000

Signature _____ Date _____

PROFESSIONAL HORSEMEN MUST MAINTAIN A CURRENT-YEAR, INDIVIDUAL AQHA MEMBERSHIP.

Are you a current, individual AQHA Member? Yes No

If so, list your customer ID #

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If not, please mark below the AQHA membership you wish to obtain:

1 year \$55 3 year \$140 Life \$1,250

Please mark below the Professional Horsemen membership you wish to obtain:

1-year membership \$50* 3-year membership \$120*

**Half of the fee will be donated to one of these programs benefitting Professional Horsemen*

Please apply my donation to the following program:

Professional Horsemen's Crisis Fund Professional Horsemen's Scholarship Fund Professional Horsemen's Development Fund

If no box is checked, the donation will be applied to the area of greatest need.

Would you like to subscribe to AQHA's magazines? If so, please fill in your choice below:

The American Quarter Horse Journal

Ranch Horse Journal

Performance Horse Journal

1 yr U.S. \$25

1 yr U.S. \$12.95

1 yr U.S. \$16.95

2 yr U.S. \$45

2 yr U.S. \$22.95

2 yr U.S. \$29.95

1 yr Canada \$50

1 yr International . . . \$80

If paying by credit card, your membership will automatically be enrolled in the convenient auto-renewal program. *You can cancel at any time.*

I would not like to enroll my membership in the auto-renewal program.

Dues payments MAY BE deductible by members as ordinary and necessary business expenses; however, contributions or gifts to the American Quarter Horse Association are not deductible as charitable contributions for federal income tax purposes. However, donations to the American Quarter Horse Foundation ARE tax deductible to the extent allowed by law. \$1 of your annual membership dues is designated for a subscription to America's Horse, AQHA's official member publication. Through the payment of a membership fee to AQHA, I acknowledge that membership in AQHA is voluntary and I agree to be bound by all the terms and conditions of AQHA's Official Handbook of Rules and Regulations.

FEEES SUBJECT TO CHANGE.

PLEASE DO NOT SEND CASH
Please list total amount enclosed (U.S. funds only) _____

Send completed form to AQHA
ATTN: Professional Horsemen
P.O. Box 200, Amarillo, Texas 79168
806-376-4811 FAX: 806-378-4675

CHECK MONEY ORDER **IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING:**

AMERICAN EXPRESS MASTERCARD VISA

CARD NUMBER			
EXP. DATE (MMYY)	DAYTIME PHONE		
CARDHOLDER NAME			
CARDHOLDER SIGNATURE			BILLING ZIP CODE

DO NOT SEND CASH • U.S. FUNDS ONLY