

YEARS OF OPERATION:

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

MEMBERSHIPS:

- AQHA Affiliate
- National Barrel Horse Association
- National Reining Horse Association
- National Thoroughbred Racing Association
- Cowboy Mounted Shooting Association
- Other Associations: _____
- AQHA Racing Affiliate
- National Cutting Horse Association
- National Snaffle Bit Association
- U.S. Dressage Federation
- National Ranch and Stock Horse Alliance
- 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:

- American Quarter Horse Association
- American Paint Horse Association
- International Buckskin Horse Association
- National Snaffle Bit Association
- Pony of the Americas Club
- Cowboy Mounted Shooting Association
- US Equestrian Federation
- Appaloosa Horse Club, Inc.
- National Cutting Horse Association
- Palomino Horse Breeders of America
- National Reined Cow Horse Association
- Western Dressage Association of America
- American Miniature Horse Registry
- Canadian Equestrian Federation
- National Reining Horse Association
- Pinto Horse Association
- World Conformation Horse Association
- Other _____

REFERENCES: *References are required from two current AQHA Professional Horsemen, two clients and one AQHA National Director. Please list:*

Professional Horseman: _____

Professional Horseman: _____

Client: _____

Client: _____

AQHA National Director: _____

SERVICES OFFERED: (fill in all that apply)

- Conditioning for sales
- Race Trainer
- Frozen/Cooled Semen
- Racing Challenge Nominated:
- Horse Shoeing
- Other _____
- Boarding/Layups
- Breaking
- Embryo Transfer
- Weanlings
- Yearlings
- Race Age
- Horse Auctions/Sales
- Mare care/Foaling services
- Professional Jockey
- Stallion Services
- Exercise Rider

▲ REFERENCE FORM IS ATTACHED BELOW. PLEASE HAVE EACH OF YOUR REFERENCES SUBMIT THE COMPLETED FORM DIRECTLY TO AQHA

TRAINING:

- Show: Youth Amateur Open
 - Western: Rail Reining Cutting Halter Roping
 - Cow horse Versatility Ranch Horse Speed Events Pattern Classes
 - English: Rail Fences Driving Pattern Classes
 - 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, AQHA Professional Horseman, 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.

Doing so constitutes a violation of the Professional Horsemen Code of Ethics 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

By checking this box, I acknowledge and I understand the expressed conditions of the horse sale referral program.

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

1-year membership \$60* 3-year membership \$150*

**One-quarter of the fee will be donated to one of these programs benefitting Professional Horsemen*

Please apply my donation to the following program:

Professional Horsemen Crisis Fund Professional Horsemen Scholarship Fund

If no box is checked, the donation will be applied to the Professional Horsemen Crisis Fund.

As of March 1,2021, donations to the Crisis Fund will be applied to the endowed portion of this fund.

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. 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.

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 #

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

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

FEEES SUBJECT TO CHANGE, AND PROFESSIONAL MEMBERSHIP APPLICATION AND RENEWAL FEES ARE NON-REFUNDABLE.

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

<input type="checkbox"/> CHECK	<input type="checkbox"/> MONEY ORDER	IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING:	
AMERICAN EXPRESS <input type="checkbox"/>		MASTERCARD <input type="checkbox"/>	VISA <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
CARD NUMBER			
<input type="text"/>	<input type="text"/>	<input type="text"/>	
EXP. DATE (MMYY)		DAYTIME PHONE	
<input type="text"/>			
CARDHOLDER NAME			
<input type="text"/>			<input type="text"/>
CARDHOLDER SIGNATURE			BILLING ZIP CODE
CREDIT CARD WILL BE BILLED FULL BALANCE OF SELECTED AND APPLICABLE FEES.			
DO NOT SEND CASH • U.S. FUNDS ONLY			

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.