

Youth Excellence Seminar Registration Form

July 11-13, 2017, Amarillo, TX

Please type or print the following information.

Name: _____ AQHA/AQHYA I.D. #: _____
(Current members must provide I.D. #.)

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Affiliate: _____ Organization: _____

Birthdate: _____ Age: _____ Gender: M F Are you a vegetarian? Yes No

List any food allergies: _____

T-shirt size: S M L XL XXL (unisex sizes)

Youth Participants

Are you a first-time Y.E.S. attendee? Yes No

Are you a delegate from your affiliate? Yes No

Are you a candidate for AQHYA officer or director? Yes No

Adult Participants

Are you an affiliate youth advisor? Yes No

Or are you an adult chaperone? Yes No

All youth must be accompanied by an adult chaperone (one adult per 8 youth participants).

Youth participants, who will be your adult chaperone? _____

If you are an adult, name(s) of participant(s) you will chaperone:

Youth participants must submit the following supplemental forms with their registration:

Agreement for Participation in AQHYA Activities AQHYA Event Clothing Guidelines

Parental/Guardian Consent, Authorization, Release & Indemnity AQHYA Code of Conduct

Adult chaperones must submit the following supplemental form with their registration:

Chaperone Code of Conduct

Registration Prices AQHYA or AQHA members \$110.00 until June 1, 2017
Non AQHYA/AQHA members \$125.00 until June 1, 2017 Registrations
received after June 1, 2017, will require a \$25.00 late fee and are subject to availability.

Method of Payment

MasterCard Visa American Express Money Order Check (# _____)

Name on Card: _____ Exp. Date: ____/____ Security Code: ____

CC#: _____ - _____ - _____ - _____ Amount: \$ _____

Please complete form and return to AQHYA, Attn: Jackie Boggs, P.O. Box 200, Amarillo, TX 79168.

If you have any questions please contact Jackie Boggs, Secretary to Youth and Recreational Activities.

Phone: 806-378-4377 Fax: 806-349-6409 E-mail: jboggs@aqha.org

YOUTH SUPPLEMENTAL FORM

Agreement for Participation in AQHYA Activities (“Agreement”)

For purposes of this Agreement, the terms “AQHYA Activities” or “Activities” include, but are not limited to, actual American Quarter Horse Youth Association (“AQHYA”) events and programs, travel to and from AQHYA events and programs and any activities (scheduled, unscheduled, supervised and/or unsupervised) that occur between the first day of scheduled events or programs and the last day of scheduled events and programs.

IN CONSIDERATION of being permitted to participate in AQHYA Activities, I _____, for myself, personal representatives, assigns, heirs, and next of kin
(printed name of AQHYA Activities Participant) (“Participant”)

1. **AGREE** to obey all rules of AQHYA and AQHYA Activities and the directions of AQHYA supervisors;
2. **ACKNOWLEDGE**, agree, and represent that I understand the nature of AQHYA Activities and that I am qualified, in good health, and in proper physical condition to participate in such Activities;
3. **FULLY UNDERSTAND THAT:** (a) **AQHYA ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING, BUT NOT LIMITED TO, “INHERENT RISKS OF EQUINE ACTIVITIES”, PERMANENT DISABILITY, PARALYSIS, AND DEATH (collectively “RISKS”);** (b) these RISKS and dangers may be caused by my own action or inaction, the action or inaction of others participating in the Activities, the condition in which the Activities takes place, or **THE NEGLIGENCE OF THE “RELEASEES” NAMED BELOW;** (c) there may be other risks and social and economic losses either not known to me or not readily foreseeable at this time; (d) “Inherent risk of equine activities” means dangers or conditions that are an integral part of equine activities, including, but not limited to, any of the following: (i) the propensity of an equine to behave in ways that may result in injury, death, or loss to persons on or around the equine; (ii) the unpredictability of an equine’s reaction to sounds, sudden movement, unfamiliar objects, persons, or other animals; (iii) hazards, including, but not limited to, surface or subsurface conditions; (iv) a collision with another equine, another animal, a person, or an object; and (v) the potential of an equine activity participant to act in a negligent manner that may contribute to injury, death, or loss to the person of the participant or to other persons, including but not limited to, failing to maintain control over an equine or failing to act within the ability of the participant; **AND I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I INCUR AS A RESULT OF MY PARTICIPATION IN THE ACTIVITIES;**
4. **WARRANT** and represent that, if the Activities involve horses, I am adequately qualified and experienced to both (a) safely handle and ride a horse in a manner to protect myself and other participants, and (b) participate with groups of riders and horses, such as to take adequate defensive action to avoid injury from third party riders and horses. Furthermore, I understand that it is my responsibility to ascertain the adequacy of my training and experience, and to conduct myself in a manner such as to make the Activities safe and enjoyable for all participants and myself;
5. **HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE AQHA, AQHF OR AQHYA OR THEIR RESPECTIVE ADMINISTRATORS, DIRECTORS, AGENTS, OFFICERS, MEMBERS, VOLUNTEERS, AND EMPLOYEES, OTHER PARTICIPANTS, ANY SPONSORS, ADVERTISERS, AND, IF APPLICABLE, OWNER AND LESSORS OF PREMISES ON WHICH THE ACTIVITIES TAKE PLACE, (EACH CONSIDERED ONE OF THE “RELEASEES” HEREIN) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES WHENEVER OR HOWEVER ARISING AS TO INJURY, DEATH AND/OR PROPERTY DAMAGE OCCURRING AS A RESULT OF MY PARTICIPATION IN THE ACTIVITIES OR CAUSED OR ALLEGED TO BE CAUSED IN WHILE OR IN PART BY THE NEGLIGENCE OF THE “RELEASEES” OR OTHERWISE.**
6. **AGREE** to indemnify, hold harmless and defend “RELEASEES” at my expense, from any and all liability, whenever or however arising, from all third party claims, demands, causes of action,

suits, judgments, liabilities, costs and expenses of any nature arising out of (i) my negligent act(s) or omissions during or related in any way to the Activities; and/or (ii) my willful act(s) or omission(s) during or related in any way to the Activities; and/or (iii) any misinformation or misrepresentations made by me in this Agreement. I agree to pay any of "RELEASEES" costs, expenses and reasonable attorney fees incurred, arising directly or indirectly out of or with respect to any third party claims or associated with the enforcement of the indemnity obligations referenced above.

7. **UNDERSTAND** that should I not abide by the established rules of conduct, I will be returned home, and I agree to pay for the necessary transportation expenses for the accompanying chaperone and myself. Specifically, insubordination, possession and/or consumption of alcoholic beverages, possession and/or use of harmful non-prescribed drugs or substances, destruction of property, cheating or misrepresentation in a competition event, failure to participate in program as scheduled, fighting, disruptive behavior, violation of AQHA or AQHYA rules and regulations, violation of established curfews and any other policies established by the supervisor designed to assure the safety and well-being of the group and individuals or engaging in any conduct detrimental to the interests of AQHYA or its programs, policies or objectives will be deemed as just cause for disciplinary action; and
8. **AGREE**, in consideration of being allowed to participate and without further consideration, that AQHA/AQHYA, AQHA Affiliates and the American Quarter Horse Foundation may use any video, photograph or other form of likeness or image of Participant and horses owned or ridden by Participant to promote AQHA/AQHYA's objectives and activities including, but not limited to, use by third parties with authorization from AQHA/AQHYA.
9. **AUTHORIZE** those in charge of the delegation to make medical arrangements for the care of me as deemed necessary. I further authorize any licensed medical person/facility to treat me. I agree to assume full financial responsibility for any medical services provided.

Please list any special health factors which the Participant has, such as asthma, heart condition, epilepsy, diabetes, allergic reaction to medication, etc. (attach additional sheet if necessary):

Please list any prescribed or patent medications that the Participant will be taking while attending and/or participating in the Activities (attach additional sheet if necessary):

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Participant Address City, State ZIP Code

Participant Phone Number

Participant's Signature (required ONLY if age 18 or over) Date

YOUTH SUPPLEMENTAL FORM

Parental/Guardian Consent, Authorization, Release & Indemnity

And I, the Participant's parent and/or legal guardian, have read this Agreement and fully understand its terms. I understand the nature of the Activities, the associated Risks of the Activities and the Participant's experience and capabilities and represent that the Participant is qualified, in good health and in proper physical condition to participate in such Activities. **I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I INCUR AS A RESULT OF THE PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES.**

I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE THE "RELEASEES" FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES WHENEVER OR HOWEVER ARISING AS TO INJURY, DEATH AND/OR PROPERTY DAMAGE OCCURRING AS A RESULT OF PARTICIPANT'S PARTICIPATION IN THE ACTIVITIES OR CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE. I agree to indemnify, hold harmless and defend "RELEASEES" at my expense, from any and all liability, whenever or however arising, from all third party claims, demands, causes of action, suits, judgments, liabilities, costs and expenses of any nature arising out of (i) Participant's negligent act(s) or omissions during or related in any way to the Activities; and/or (ii) Participant's willful act(s) or omission(s) during or related in any way to the Activities; and/or (iii) any misinformation or misrepresentations made by the Participant or me in this Agreement. I agree to pay any of "RELEASEES'" costs, expenses and reasonable attorney fees incurred, arising directly or indirectly out of or with respect to any third party claims or associated with the enforcement of the indemnity obligations referenced above.

Should the Participant not abide by the established rules of conduct, I understand that the Participant will be returned home, and I agree to pay for the necessary transportation expenses for the Participant and the accompanying chaperone. I authorize those in charge of the delegation to make medical arrangements for the care of the Participant as deemed necessary. I further authorize any licensed medical person/facility to treat the Participant. I agree to assume full financial responsibility for any medical services provided.

I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IS ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

Printed Name of Parent/Guardian

Physical Address

City, State

ZIP Code

Home Phone

Work Phone

Cell Phone

Name of another person who would know the whereabouts of Parent/Guardian

Phone

Name of Family Physician

Address

Phone

Parent/Guardian Signature (required regardless of participant's age)

Date

YOUTH SUPPLEMENTAL FORM

AQHYA Code of Conduct

One purpose of AQHYA is “to encourage high moral character, sportsmanship, and clean living among all its members.” To this end, AQHYA members should commit themselves to gaining the knowledge and skills to enable them to make wise decisions through opportunities that develop independence. By gaining a sense of independence, the AQHYA member is committed to exercise self-discipline, personal responsibility and become an independent thinker. Therefore, the youth, by signing this contract, agrees to conduct him- or herself in a responsible manner and abide by all expectations as stated.

Expectations

- Possession or consumption of alcoholic beverages is prohibited.
- Possession or use of harmful non-prescribed drugs is prohibited.
- Smoking or using other tobacco products is prohibited.
- Participants will communicate in an open, honest, and respectful manner in all situations, which includes not engaging in or tolerating slander, put-downs, insults, taunting, name calling, yelling, profane language, sexual innuendos, or other comments or hostile behaviors likely to offend, hurt, or set a bad example.
- Participants will not threaten physical harm or take action with physical harm or verbal abuse.
- Participants will not engage in public displays of affection or inappropriate sexual conduct.
- Participants will show respect for the property and facilities used during the event and will assume financial responsibility for any damages they cause.
- Participants will observe the curfew times as set forth in the event program and remain in their assigned room. Boys and girls are not allowed to be in each other’s rooms for any reason.
- Unauthorized absence from the event premises is not permitted.
- Participants will adhere to the AQHYA Event Clothing Guidelines.
- Cheating or misrepresentation at any AQHYA event is prohibited.
- Participants will follow the direction of AQHA staff, youth advisors, chaperones, or designated group leaders, as well as support and abide by the decisions of these individuals.
- Participants will refrain from conduct that is detrimental to the interest of AQHA, its programs, policies, objectives, and harmonious relationship of its members.
- Participants will be responsible for their own behavior/conduct, uphold high standards for the group, and accept the consequences for inappropriate behavior.
- Participants will participate fully in the program, activity, and/or event, as well as adhere to any and all rules at the designated AQHYA event they are attending.
- Participants will adhere to any and all AQHA and AQHYA rules and regulations.

In addition to other disciplinary actions deemed appropriate by the AQHYA Advisory Board, I understand the following disciplinary action may be taken should I violate the above expectations:

- I may be sent home immediately at my own expense and forfeit all AQHYA awards and trips.
- I may be suspended from attending any AQHYA event for one year (defined as through that same event the following year) from the time of the infraction.
- I may not be allowed at any time during the suspension year to represent AQHYA in any leadership position at the affiliate or national level.
- I may not be allowed to represent AQHYA at any state, regional, or national event during the suspension year.
- My AQHA and/or AQHYA membership may be suspended for a length of time to be determined by the AQHYA Advisory Board.
- Second offenders may be ineligible to participate in any state, regional, or national event or hold a leadership position for the remainder of their AQHYA career.
- I understand that the consumption, possession, or use of alcohol or harmful non-prescribed drugs by a minor is against the law, and I know that I may be reported to the proper authorities.

I, _____, understand that my behavior affects the entire AQHYA
(print name of participant)

community and that I represent myself, my family, and my affiliate as well as the American Quarter Horse Association. I have read and understand the expectations and penalties related to the AQHYA Code of Conduct.

Signature of participant

Date

I, _____, have read and understand the expectations and penalties
(print name of parent or guardian)
related to the AQHYA Code of Conduct and agree to be bound by them.

Signature of parent or guardian

Date

YOUTH SUPPLEMENTAL FORM

AQHYA Event Clothing Guidelines

General Guidelines:

- AQHYA members should dress neatly and appropriately. Clothing must be clean and free of holes and tears.
- AQHYA members should dress modestly. No shorts unless designated. No bare skin between shirt and pants. No cleavage.
- AQHYA members should remove caps and hats inside buildings. Caps and hats are only appropriate to wear when we are dancing the night away!

Business Trips and Events:

- Business-appropriate attire should be worn. Dress as if you were attending church or a wedding.
- Male AQHYA members wear a suit and tie, or a buttoned and collared shirt with a tie and dress slacks and dress shoes or polished boots. Please remember to tuck your shirts in and wear a belt.
- Female AQHYA members wear a dress or skirt of at least mid-thigh length, or slacks with dressy footwear. Pair skirts and slacks with a buttoned and collared shirt or blouse.

Formal/Semi-Formal Events:

- Male AQHYA members should wear a buttoned and collared shirt with a tie, dress slacks or dark jeans with a belt and appropriate footwear.
- Female AQHYA members wear your best dress or a skirt of at least mid-thigh length or slacks/dress jeans with a coordinating top. Sundresses are okay, but no cleavage, spaghetti straps or midriffs showing, please! Finish your look with appropriate footwear.

Casual Conferences and Events:

- At times, business casual or casual attire is appropriate during selected AQHYA events and activities (i.e. Youth Excellence Seminar, National Racing Experience, etc.)
- Male AQHYA members may wear nice, clean jeans or khakis/slacks and their choice of a button-down shirt, polo shirt or appropriate t-shirt.
- Female AQHYA members may wear nice, clean jeans or a skirt or dress of at least mid-thigh length. Ladies shirts within the event clothing guidelines are appropriate.

Additional Guidelines:

- No garments, buttons or accessories with offensive slogans, advertisements or artwork.
- No muscle shirts or long chains.
- No tube tops, halter tops, spaghetti straps, off-the-shoulder tops, low-cut tops, backless tops or sheer shirts. Spaghetti straps may be layered with a shirt with sleeves or a cardigan. All shoulder straps must be at least three fingers wide.
- Swimwear should not be worn outside of the pool area.
- When shorts are allowed, they must not be shorter than your fingertips when standing straight with arms at your side.

If an AQHYA member is inappropriately dressed, he or she will be asked by an AQHA employee, youth advisor or adult chaperone to immediately change into something appropriate. If an AQHYA member refuses to comply in a timely manner, he or she will be sent home at the parent's expense.

I, _____, understand that my appearance can reflect positively or
(print name of participant)

negatively on the entire AQHYA community and that I represent myself, my family, and my affiliate as well as the American Quarter Horse Association. I have read and understand the expectations and penalties related to the AQHYA Event Clothing Guidelines.

Signature of participant

Date

I, _____, have read and understand the expectations and penalties
(print name of parent or guardian)
related to the AQHYA Event Clothing Guidelines and agree to be bound by them.

Signature of participant

Date

CHAPERONE SUPPLEMENTAL FORM

Chaperone Code of Conduct

The primary purpose of this code of conduct is to insure the safety and well-being of all AQHYA participants (i.e. members, their parents and families, staff and volunteers).

A chaperone is someone who will have independent supervision of an AQHYA member on a day trip or overnight. To be an AQHYA event chaperone, each individual must be at least 25 years of age.

AQHYA Chaperones will

- Cooperate with, support, and empower adult staff and youth leadership as they facilitate the event.
- Oversee the health, safety, and whereabouts of the young people for which they are responsible.
- Ensure the supervision of the young people for which they are responsible and be readily available at all times.
- Act as an informal mentor to young participants and model appropriate behavior.
- Abide by the same rules as youth participants, spelled out in the AQHYA Code of Conduct and Event Clothing Guidelines; including full participation and no use or possession of alcohol, drugs, or weapons, before, during, or after an event and until the youth are released from their responsibility.
- Orient youth participants as to expectations of dress, manners, safety, punctuality, etc. for the event and to answer concerns and questions of the youth.
- Enforce all written and signed behavior expectations established for youth participating in the AQHYA event.
- Consult with AQHA staff contacts in determining appropriate disciplinary action in the case of inappropriate youth behavior.
- Refrain from causing or demonstrating conflict with other parents, volunteers, chaperones, or agents in front of the youth.
- Act in the best interest of the youth in the event of an emergency.
- Communicate with fellow adults and youth in an appropriate manner with no swearing, cursing, or abusive language in all forms of communication, including social media.
- Avoid sexual contact of any type with youth and/or personal displays of affection with other adults in the presence of youth.
- Not ignore situations involving bullying, hazing or harassment, nor fail to intervene if youth are being threatened, humiliated or intimidated by other youth or adults.
- Understand the need to register any accompanying family members (spouses, underage children) as event attendees.
- If transporting youth for any AQHYA event, certify that they
 - have a valid driver's license.
 - understand the responsibilities of safe driving.
 - have vehicle insurance, individual liability and medical coverage.
 - have no prior convictions for driving while impaired or driving while under the influence of alcohol or drugs.

It is recommended that for every eight participants a minimum of one adult be present as chaperone. If the nature of the activity is particularly risky or involves younger members reduce the ratio. If both genders are represented as participants, it is recommended both genders be represented by chaperones.

I, _____, have read and understand the expectations and penalties
(print name of chaperone)
related to the Chaperone Code of Conduct and agree to be bound by them.

Signature of chaperone

Date