

AQHA Professional Horsemen Application

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

Name															Phone (preferred number to be listed on the Web site)																			
Address																									Phone (this is a second number if needed)									
City															State					Zip														
Web site address (if available)																																		
Country										E-mail address (if available)																								
AQHA Identification Number										Other AQHA ID numbers you may have										<i>Must maintain individual, current-year membership</i>														

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 and operations in a manner which promotes the 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 American Quarter Horse Association of 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: _____

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:

- Life\$750
- 3 year.....\$ 80
- 1 year.....\$ 40

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 magazine? If so, please fill in your choice below:

1yr	3yr	1yr	1yr
U.S.	U.S.	Canada	International

The American Quarter Horse Journal \$25 \$60 \$50 \$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

<input type="radio"/> CHECK <input type="radio"/> MONEY ORDER		IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING:	
AMERICAN EXPRESS		MASTERCARD VISA	
<input type="text"/>		<input type="text"/>	
<input type="text"/>		<input type="text"/>	
<small>CARD NUMBER</small>			
<input type="text"/>		<input type="text"/>	
<small>EXP. DATE (MMYY)</small>		<small>DAYTIME PHONE</small>	
<input type="text"/>			
<small>CARDHOLDER NAME</small>			
<input type="text"/>			<input type="text"/>
<small>CARDHOLDER SIGNATURE</small>			<small>BILLING ZIP CODE</small>