

2014 Novice Youth Renewal Application



American Paint Horse Association

P.O. Box 961023 • Fort Worth, Texas 76161-0023
 (817) 834-APHA (2742), extension 436 • Fax (817) 222-8489
 ajpha.com • youth@apha.com

COMPLETE APPLICATION IN FULL
For eligibility requirements see Rule YP-205
 Omitting information will delay processing.

Name: _____ AjPHA ID#: _____

Address: _____ Phone#: _____

City: _____ State: _____ Zip: _____ Birth Date **(Required)**: _____

Email (Youth or Parent): _____
 (will be added to account for updates and information)

Fee Schedule

Fees are payable in U.S. Funds Only.
 Normal processing time is approximately 3-4 weeks.

All exhibitors must be current AjPHA members in order to be eligible to show.

AjPHA membership

1-Year membership \$20 _____

3-Year membership \$40 _____
 (Must be 18 on Jan 1 in 3 years)

J-Term membership \$100 _____
 (Expires December 31 of 18-Year-Old year)

Novice Youth Card \$15 _____
 (With current AjPHA membership)
 Novice Youth cards expire on December 31, 2014

E-mail (w/attachment)/Fax Fee: \$5 _____
 E-mail / Fax No.: _____

Additional Rush Fee \$25 _____
 Rush fee is recommended if card is needed in less than 3 weeks.
 Need card by: _____
 Note: This date is not guaranteed. E-mail return included.

TOTAL AMOUNT DUE \$ _____

Payment Must Accompany Application

Check **Money Order**

VISA **MasterCard** **American Express**

If you pay by check, it may be converted into an electronic funds transfer.

Please complete credit card information:

Credit Card Number _____

Expiration Date _____ CVV # _____

Name on Card _____

Signature _____

Return this form to:



American Paint Horse Association

Attn: Director of Youth Activities
 P.O. Box 961023 • Fort Worth, Texas 76161-0023
 (817) 222-6436 • Fax (817) 222-8489
 apha.com/youth • youth@apha.com

REV: 08/13

Please answer all questions. Any incomplete information will delay processing.

In submitting this application for the Novice Youth program, I affirm that the information I have listed is correct. I understand that my Novice Youth status is revocable. By signing this application, I accept responsibility for knowledge of APHA rules regarding the Novice Youth program.

Signature of Youth: _____

Birth date: _____

Signature of Parent/Guardian: _____

Daytime phone number: _____

E-mail (youth or Parent): _____
 (Will be added to account for updates and information)

Name of horse(s): _____

Owner(s): _____

Relationship to all Owner(s): _____
 See Rule YP-015.A. (If not related, state "No Relation")

Applicants MUST complete the following:

- 1) Have you competed in equine competition/shows at any time? No Yes
- 2) If yes, please circle all that apply: Open Shows, 4-H, APHA, AQHA, POA, PtHA, apHC, IBHA, PHBA, AHA, AMHA, ABRA, NCHA, NRHA, NRCHA, NSBA, USEF, Other: _____
- 3) Have you ever won a World or Reserve World Champion title in any equine association?
 No Yes **If Yes, list association(s) and class(es):** _____
- 4) Please list **ALL performanc points and money you earned from other equine associations in the past (12) months.** If only APHA Novice Youth/Youth points have been earned, please state: "Novice Youth/Youth points only." If no points or money have been earned, please state: "None earned."

Organization	Division	Class	Points, Money & Titles Earned
Ex: AQHA	Novice Youth	Western Pleasure	37 points + 2012 Res World Champion

Note: APHA reserves the right to check all breed/equine registries for any points, money and titles earned.