

2017 Novice Amateur Status Reinstatement Request Form & Fee



American Paint Horse Association

P.O. Box 961023 • Fort Worth, Texas 76161-0023
 (817) 222-6440 • Fax: (817) 222-8489
 apha.com/amateur • amateur@apha.com

See Rule AM-205 for Novice Amateur Eligibility

See Rule AM-300 for complete Walk-Trot rules

COMPLETE FORM IN FULL

Omitting information will delay processing

A. *Please note: Applicants are not eligible for the Amateur Program until the age of 19 (unless proof of marriage is provided) as of January 1, 2017.

Last Name: _____ First Name: _____ Middle Initial: _____

APHA Member ID # (if known): _____ **Birth Date (Required):** _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Evening Phone: _____

E-mail: _____

AM-205.A.5—An individual who previously became ineligible for Novice Amateur status in a category due to the point restriction, World or Reserve Championship title, or earnings, may have their Novice Amateur status in that category restored if, ***in the past 10 years prior to their re-application they have not earned ten (10) or more APHA points and/or other associations' revalued performance points (ROM)***, any performance points, money or a World Champion or Reserve World Champion title in any recognized equine association, in that category, including but not limited to APHA, AQHA, IBHA, PHBA, PtHA, AHA, AMHA, ABRA, POA, NCHA, NBHA and/or NRHA.

ex: Holly showed in 1985 as a youth and earned a World Championship title in Western Horsemanship. Holly hasn't shown since her youth years. Since it has been more than 10 years since she has earned any points, titles or money in Western Horsemanship, Holly is eligible to reinstate Novice Amateur status in Western Horsemanship.

B. Place a checkmark next to the category(s) in which you are requesting Novice Amateur reinstatement:

- | | |
|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Category 1. Barrel Racing, Goat Tying, Pole Bending, Stake Race | <input type="checkbox"/> Category 11. Trail, Ranch Trail |
| <input type="checkbox"/> Category 2. Western Riding, Ranch Riding | <input type="checkbox"/> Category 12. Team Penning, Ranch Sorting |
| <input type="checkbox"/> Category 3. Jumping, Working Hunter | <input type="checkbox"/> Category 13. Hunter Hack |
| <input type="checkbox"/> Category 4. Pleasure Driving, Utility Driving | <input type="checkbox"/> Category 14. Reining, Ranch Reining |
| <input type="checkbox"/> Category 5. Showmanship | <input checked="" type="checkbox"/> Category 15. Working Ranch Horse - No Longer Offered |
| <input type="checkbox"/> Category 6. Breakaway Roping, Tie-Down Roping,
Heading, Heeling, Steer Stopping | <input type="checkbox"/> Category 16. Cutting |
| <input type="checkbox"/> Category 7. Western Pleasure, Ranch Pleasure | <input type="checkbox"/> Category 17. Hunt Seat Equitation Over Fences |
| <input type="checkbox"/> Category 8. Hunter Under Saddle | <input type="checkbox"/> Category 18. Cowboy Mounted Shooting |
| <input type="checkbox"/> Category 9. Horsemanship | <input type="checkbox"/> Category 19. Dressage |
| <input type="checkbox"/> Category 10. Hunt Seat Equitation | <input type="checkbox"/> Category 20. Limited Working Cow Horse, Limited Ranch Cow Work (Boxing) |
| | <input type="checkbox"/> Category 21. Competitive Trail Horse |

C. It is the exhibitors' responsibility to **FULLY DISCLOSE** all previous showing history on this or any attached pages.

1) In the above categories, have you earned less than 10 APHA points and/or other associations' revalued performance points, any performance points, money or World/Reserve World Champion title in any recognized association?

NO

YES If yes, list any world or reserve world champion titles: _____

2) On the table below, please list ALL lifetime points and money earned with each horse from OTHER equine associations for each category that Novice Amateur reinstatement is requested.

*If only APHA points have been earned, please state "APHA Points Only".

EXAMPLE

CATEGORY	ASSOCIATION	DIVISION	CLASS	LAST YEAR SHOWN	POINT TOTAL
1	AQHA	Youth	Barrel Racing	2001	10.5 (APHA Pts Only)

2017 Novice Amateur Status Reinstatement Request Form & Fee - continued

CATEGORY	ASSOCIATION	DIVISION	CLASS	LAST YEAR SHOWN	POINT TOTAL

** If you requested show records from any other association, please attach to form.

D. ALL APPLICANTS MUST SIGN

In submitting this form requesting Novice Amateur reinstatement in the APHA Amateur Program, I affirm that the information contained herein is true and correct. I understand that my status in the APHA Amateur Program and my APHA Amateur/Novice Amateur/Walk-Trot card is revocable. Should the Association find that, for any reason, I am no longer eligible to compete in APHA-approved Amateur/Novice Amateur/Walk-Trot classes, I agree to surrender said card to the Association immediately upon request. Furthermore, should I, for any reason, become ineligible to compete as an Amateur/Novice Amateur/Walk-Trot exhibitor, I will refrain from exhibiting in the corresponding classes, and I agree to voluntarily surrender my APHA Amateur/Novice Amateur/Walk-Trot card to the Association without request. Failing to do so, I am subject to possible disciplinary action under the Association's general rules.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

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

PAYMENT INFORMATION

Fee Schedule

- \$25 - **Processing Fee** (processed within 10-15 business days once received)
- \$25 (additional) - **Rush Fee** (processed within 2-5 business days once received)

Total Amount Due: \$ _____

All payments must be made in U.S. Funds Only

- Check** **Money Order** **VISA** **MasterCard** **American Express**

If paying by check, checks may be converted into an electronic transfer.

If paying using a credit card, please complete the credit card information below:

Credit Card Number: _____

Name on Credit Card: _____

Expiration Date: _____ CCV #: _____

Cardholder Signature: _____



Contact, mail, fax or email form to:
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