

# International Judge Application Form



## American Paint Horse Association

122 E. Exchange Ave., Suite 420 • Fort Worth, Texas 76164  
Fax: (817) 834-3152 • apha.com • elawhorn@apha.com

Card Type: European-Only  Latin American-Only

### Be sure to mail in the following with your application:

1. Your completed application in English.
2. The \$149 application fee (U.S. funds only).
3. A recent high-resolution photograph, suitable for publication, in the attire you would wear to judge a horse show (photo becomes the property of APHA).
4. Proof of current APHA membership, or your APHA membership fees (if not current). APHA membership is \$89 per year.

Please type or print

APHA ID Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

### Employment Information

Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Business Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Country: \_\_\_\_\_

Secondary Occupations and Addresses: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Judging History

I have judged approximately \_\_\_\_\_ shows.

List any major shows you have judged: \_\_\_\_\_

\_\_\_\_\_

List the largest events you have judged, including date, location and show name:

	Date	Location	Name of Show
1.			
2.			
3.			
4.			
5.			

Are you a member of an APHA international affiliate?  Yes  No If yes, which affiliate? \_\_\_\_\_

Are you an APHA Professional Horseman?  Yes  No

### Office Use Only

Applicant School:

\_\_\_\_\_

Approved  Denied

Date: \_\_\_\_\_

Have you applied for approval as an APHA judge previously?  Yes  No If yes, what year? \_\_\_\_\_

Have you previously been approved as an APHA judge?  Yes  No If yes, what year? \_\_\_\_\_

Have you ever been, or are you now, suspended from or on probation with any equine association?  Yes  No If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want to be a Paint Horse judge?  
\_\_\_\_\_  
\_\_\_\_\_

List all recognized equine and horse show associations with which you are currently approved, and the dates of approval:

Association Name	Approval Date	Current Status	Clinic/Seminar	Date & Location

List any seminars you have attended, if not mentioned above:  
\_\_\_\_\_  
\_\_\_\_\_

List your accomplishments with Paint Horses:  
\_\_\_\_\_  
\_\_\_\_\_

List all Paint Horse clubs or associations of which you are a member, and the offices or appointments you have held:  
\_\_\_\_\_  
\_\_\_\_\_

List your accomplishments in the horse industry:  
\_\_\_\_\_  
\_\_\_\_\_

## Please Read and Sign the Following Statement

The information contained on this application is true and correct. I understand that I may be removed as an APHA judge or applicant if it is determined that there are any inaccuracies or discrepancies in this application. I further understand that the position of APHA judge is a privilege and not a right, and that my selection as an approved APHA judge is at the sole discretion of the APHA Judges Committee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Fees

JUDGE APPLICATION FEE \$149  
US Funds Only

### Adult Membership Levels

- One-year—\$89
- Three-year—\$199
- Five-year—\$319
- Lifetime—\$1,309

### Total Amount Due

Judge Application Fee: \$ \_\_\_\_\_  
Membership Dues: \$ \_\_\_\_\_  
**TOTAL:** \$ \_\_\_\_\_

MasterCard  VISA  American Express

### If paying by credit card, please complete the following:

American Paint Horse Association  
ATTN: Performance Department  
122 E. Exchange Ave., Suite 420  
Fort Worth, Texas 76164

Card No.: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV#: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

APHA ID No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Signature: X \_\_\_\_\_



### Pay APHA Fees with PayPal

To pay your application and/or membership fees via Paypal, please go to <https://www.paypal.me/apha> and follow the instructions. In the "Notes to Seller" section, please write "Fees for International Judge Application Form and/or APHA Membership for [YOUR FULL NAME]". Then send an email to [askapha@apha.com](mailto:askapha@apha.com) with the same message to let our Accounting Department know that payment has been made via PayPal.