



American Quarter Horse Association Breeder Referral Application

**Qualifications to join the program as a breeder:**

- Must be listed as a breeder (according to AQHA rules) of at least one registered foal for at least four consecutive years, including the current year.
- Must be an AQHA Member in good standing for at least four consecutive years, including the current year.

Qualifications to join the program as a stallion owner:

- Must have submitted a stallion breeding report for the past four years.
- Must be an AQHA Member in good standing for at least four consecutive years, including the current year.

CONTACT INFORMATION:

Name _____

Phone _____ *(Preferred number to be listed on the Web site)*

Address _____

Phone _____ *(list a second phone if needed)*

City, State, Zip _____

Web site address _____ *(If available)*

Country _____

E-mail address _____ *(If available)*

AQHA Identification Number _____

List other I.D. numbers under which you have AQHA records:

4aHORSE is an AQHA operated Web site and referral service designed to provide horse enthusiasts and potential owners or riders with reliable and timely information on horses for sale; professional services such as training and riding instruction; and horse vacations. By being a member of AQHA's Breeder Referral Program, you automatically are eligible to be placed in the 4aHORSE referral database. If you do not wish to have referrals through the 4aHORSE program, please indicate your choice here:

 I do not wish to be placed in the 4aHORSE referral program. **I wish to be placed in the 4aHORSE referral program.****MEMBERSHIPS:**

Other association memberships that you have: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> AQHA Affiliate | <input type="checkbox"/> American Horse Shows Association |
| <input type="checkbox"/> National Barrel Horse Association | <input type="checkbox"/> National Cutting Horse Association |
| <input type="checkbox"/> National Reined Cow Horse Association | <input type="checkbox"/> National Reining Horse Association |
| <input type="checkbox"/> National Snaffle Bit Association | <input type="checkbox"/> PRCA <input type="checkbox"/> WPRA |
| <input type="checkbox"/> National Thoroughbred Racing Association | <input type="checkbox"/> Other _____ |

REFERENCES: List the name, address and phone number of three customers who can be contacted by AQHA concerning your business reputation. Additionally, list any AQHA Directors who are familiar with you and your business reputation.

Name: _____

Name: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Phone: _____

Phone: _____

Name: _____

Name of Director: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Phone: _____

Phone: _____



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SERVICES OFFERED: (Check *all* that apply)

- Conditioning for sales Export/International Sales quarantine facilities/international shipping point
- Boarding/Layups Mare care/Foaling services Stallion Services
- Shipped semen services Approved International Shipped Semen Services
- Frozen Semen Racing Challenge Enrolled Foals
- Incentive Fund Nominated: ____ Stallions ____ Foals
- Horse Auctions Horse Shoeing Other _____

How many of the following do you sell per year?

____ Weanlings ____ Yearlings ____ Broodmares
 ____ Horses in training ____ Trained horses ____ Other _____

Do you breed for or sell specific colors of horses? Yes No

If so, what colors? _____

Do you breed and raise specific bloodlines? Yes No

If so, please list: _____

How many American Quarter Horse stallions do you stand? _____

Please list stallions' names, registration numbers and breeding fees:(*attach list if necessary*)

_____	_____
_____	_____
_____	_____

Please select discipline(s) or use(s) for which you breed for:

- | | | | | |
|----------|------------------------------------|----------------------------------|--|---------------------------------|
| | <input type="checkbox"/> Ranching | <input type="checkbox"/> Racing | <input type="checkbox"/> Recreational Riding | |
| Western: | <input type="checkbox"/> Rail | <input type="checkbox"/> Reining | <input type="checkbox"/> Cutting | <input type="checkbox"/> Roping |
| | <input type="checkbox"/> Cow Horse | <input type="checkbox"/> Halter | <input type="checkbox"/> Speed Events | <input type="checkbox"/> Rodeo |
| English: | <input type="checkbox"/> Rail | <input type="checkbox"/> Fences | <input type="checkbox"/> Driving | |

How do you market your horses? (Check all that apply)

- Private Treaty Public Sales Production Sale

Price range of horses for sale:

- \$5,000 or under \$5,001 - \$10,000 \$10,001 - \$25,000 more than \$25,000

YEARS OF OPERATION: *Please indicate all that are appropriate.*

Years as a breeder: _____ Years at current location: _____

If less than two years, previous location:

Address: _____ City, State, Zip: _____

If your horses are located somewhere other than your current address, please provide the following information:

_____	_____	_____
Name of person, farm or business	AQHA Identification Number	Phone

_____	_____
Address	Web site address (<i>If available</i>)

_____	_____
City, State, Zip	E-mail address (<i>If available</i>)



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**BACKGROUND INFORMATION:**

Have you ever been convicted of a felony? Yes No

If yes, give full details: _____

Have you ever been suspended or sanctioned by a voluntary organization? Yes No

If yes, give full details: _____

FINANCIAL INFORMATION:

List at least one financial institution which has knowledge of your credit worthiness and business reputation. Please attach a letter of recommendation from that institution.

Name of financial institution: _____ Address _____

City, State, Zip _____ Daytime telephone (____) _____

Social Security Number of applicant or Social Insurance (Canada) Number of applicant:

____ - ____ - _____

Federal tax identification number: *(if applicant is a corporation or other legal entity)*

____ - _____

CONSENT OF CREDIT INFORMATION REQUEST

As an applicant, AQHA may request an investigative consumer report which will include information as to my character, general reputation, personal characteristics, and mode of living. Said report is covered by the Fair Credit Reporting Act, which is a federal law. Under its provisions, AQHA may need another signed authorization for such disclosure at the time the report is ordered.

However, this questionnaire shall constitute my written consent for AQHA or any other person or organization authorized to request credit worthiness. Said persons also are authorized to request credit, financial, or business information concerning me from any credit bureau or their statistical organization and that, upon request, I will give AQHA further authorization as is needed.

The above information and consent for credit investigation is true and correct to the best of my knowledge and belief, and is hereby submitted by the undersigned to support my pending application for membership in the American Quarter Horse Association Breeder Referral Program. If at any future time AQHA determines there is the need for additional information, I agree to promptly provide such information and fully cooperate to show myself a worthy candidate for membership.

Signature

Date



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AQHA BREEDER REFERRAL CODE OF ETHICS

We the members of American Quarter Horse Association's Breeder Referral Program, in carrying out our role as breeders of American Quarter Horses, 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 support AQHA's mission of preserving the integrity of the American Quarter Horse breed by upholding quality, selective breeding standards and accurate records.
- 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, forthright manner.
- To handle breeding operations and business dealings in a manner which promotes the image of the American Quarter Horse and instills confidence in the industry.

By signing this application, I agree to be bound by the rules of AQHA and the Code of Ethics of the American Quarter Horse Association of Breeder Referral. I understand that in order to participate in this program, I must maintain a continuous membership with AQHA.

Applicant's signature: _____ AQHA ID# _____

Must maintain individual, current-year membership

Date: _____

AQHA Breeder Referral Membership:

- 3 year.....\$60
- 1 year.....\$25

AQHA Membership:

- Life.....\$400
- 3 year.....\$70
- 1 year.....\$35

Journal Subscriptions:

	1yr US	3yr US	1yr Canada	1 yr International
The Quarter Horse Journal	<input type="checkbox"/> \$25	<input type="checkbox"/> \$60	<input type="checkbox"/> \$50	<input type="checkbox"/> \$80
The Quarter Racing Journal	<input type="checkbox"/> \$25	<input type="checkbox"/> \$60	<input type="checkbox"/> \$50	<input type="checkbox"/> \$80
Both Magazines	<input type="checkbox"/> \$40	<input type="checkbox"/> \$100	<input type="checkbox"/> \$81	<input type="checkbox"/> \$150

Total Enclosed: _____
(U.S. funds only)

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. 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.

FEES SUBJECT TO CHANGE.

Please do not send cash.

- Check or Money Order (U.S. funds only)
- Visa
- MasterCard

If charging to a credit card:

Name on Credit Card: _____

Card No.: _____ Expiration date: _____

Signature: _____

Send completed form to:
P.O. Box 200 • Amarillo, Texas 79168
1600 Quarter Horse Drive • Amarillo Texas 79104
(806) 376-4811