



2019 IOWA QUARTER HORSE ASSOCIATION MEMBERSHIP FORM

January 1-December 31, 2019



INDIVIDUAL/FAMILY/BUSINESS MEMBERSHIP

(if participating in Open, Amateur &/or Youth Divisions for IQHA Year End Awards as an owner or exhibitor, an AQHA# & expiration is required)
(All Open, Amateur &/or Youth division exhibitors & owner(s) must have a paid IQHA membership for the horse to earn points in those classes)

X \$40= [ ]
Membership &
Open division points

Name: \_\_\_\_\_ AQHA# \_\_\_\_\_ Exp. \_\_\_\_\_
(Exactly as appears on AQHA card if participating in IQHA Open Division Year End Awards)

Spouse Name: \_\_\_\_\_ AQHA# \_\_\_\_\_ Exp. \_\_\_\_\_
(Exactly as appears on AQHA card if participating in IQHA Open Division Year End Awards)

Address: \_\_\_\_\_ City/St. \_\_\_\_\_ Zip \_\_\_\_\_

Ph#: \_\_\_\_\_ Email: \_\_\_\_\_

County: \_\_\_\_\_ District: \_\_\_\_\_ Children (18 & Under) \_\_\_\_\_
(if living in Iowa) (if living in Iowa) (under family membership, does NOT include an IQHYA membership, see below)

All children 19 & over must have their own membership

If you would like to participate in the IQHA Amateur Year End Awards Program, please fill out ALL information below & submit appropriate fees (AQHA numbers are required)

AMATEUR SPONSORSHIP-All amateur/novice amateur exhibitors must have a family/individual IQHA membership & pay an IQHA amateur activities sponsorship fee of \$15/amateur for amateur/novice amateur points to count &/or to participate in the Non-Pro Division of the IQHA Futurity, see additional IQHA point rules at www.iowaquarterhorse.com.

Amateur: \_\_\_\_\_ AQHA# \_\_\_\_\_ Exp. \_\_\_\_\_ X \$15= [ ]
(Exactly as appears on AQHA card) Amateur division points

2nd Amateur: \_\_\_\_\_ AQHA# \_\_\_\_\_ Exp. \_\_\_\_\_ X \$15= [ ]
(Exactly as appears on AQHA card) Amateur division points

YOUTH MEMBERSHIP- All youth must also have an IQHA family membership (follows AQHA Family Guidelines)

Youth Name: \_\_\_\_\_ AQHYA# \_\_\_\_\_ Exp. \_\_\_\_\_ X \$10= [ ]
(Exactly as appears on AQHA card) Youth Membership

Age as Jan 1 \_\_\_\_\_ DOB \_\_\_\_\_ Name of Parent(s) \_\_\_\_\_

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

Email \_\_\_\_\_ Ph# \_\_\_\_\_

Name on Family Membership (list relationship if not parent) \_\_\_\_\_

IQHYA SPONSORSHIP-

All youth must pay an IQHYA sponsorship fee of \$50/youth to be eligible for IQHYA Year End Awards &/or to be eligible for Youth World & Congress NYATT Teams

X \$50= [ ]
Youth division points/NYATT

HORSEBACK RIDING PROGRAM Mark what type Youth [ ] Adult [ ]

X \$15= [ ]
Horseback Riding

Participant Name(s) \_\_\_\_\_

Please Print

I enroll in this program at my own risk and subject to the rules of the Horseback Riding Program. I agree that I will be doing this riding/driving on my own time and logging the hours and locations at which I have ridden/driven. In case of loss of injury involving either horse or rider/driver while I am riding/driving, I will make no claim whatsoever against this program, any individual connected with it, or Iowa Quarter Horse Association. Form available at iowaquarterhorse.com

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

Signature of Participant \_\_\_\_\_ Date \_\_\_\_\_

\$ [ ]
TOTAL DUE

OFFICE USE ONLY

REC'D BY \_\_\_\_\_ DATE \_\_\_\_\_ PAYMENT METHOD: CASH CC CHECK # \_\_\_\_\_

Remit form with payment to:
IQHA, c/o Shelli Eatwell,
12950 N 99th Ave W, Collins, IA 50055