

2018 AQHYA World Championship Show HARDSHIP APPLICATION

**Applications must be completed fully, including all signatures and written explanations.
Incomplete applications may not be approved.**

Applications must be received in the AQHA office by MAY 1st, 2018.

Hardship applications may be revoked under the following circumstances: a) the hardship applicant nationally qualifies in the respective classes or b) the hardship youth's horse dies or is injured, whereupon documentation from the horse's veterinarian must be supplied to AQHA before the hardship is revoked. Requests due to other circumstances may be considered on a case-by-case basis.

APPLICANT INFORMATION

Applicant's Name: _____	AQHYA I.D. #: _____
Address: _____	
City: _____	State: _____ Zip: _____
Phone Number: _____	Email: _____
Parent/ Guardian: _____	
My affiliate of residence is: _____	
I request hardship to the following AQHYA affiliate: _____	

SHOWS & ACTIVITIES

List the shows or activities in which you have participated with your desired affiliate during the current qualifying period.

1. Show or Activity: _____ Date: _____ Miles from home: _____
2. Show or Activity: _____ Date: _____ Miles from home: _____
3. Show or Activity: _____ Date: _____ Miles from home: _____
4. Show or Activity: _____ Date: _____ Miles from home: _____
5. Show or Activity: _____ Date: _____ Miles from home: _____

List the shows or activities held in your home state during the current qualifying period.

1. Show or Activity: _____ Date: _____ Miles from home: _____
2. Show or Activity: _____ Date: _____ Miles from home: _____
3. Show or Activity: _____ Date: _____ Miles from home: _____
4. Show or Activity: _____ Date: _____ Miles from home: _____
5. Show or Activity: _____ Date: _____ Miles from home: _____

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CLASS INFORMATION

List classes in which you intend to nationally qualify:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

List classes in which you intend to state qualify:

- 1. _____
- 2. _____
- 3. _____
- 4. _____
- 5. _____
- 6. _____

REASON FOR HARDSHIP

Select the reason you are seeking a hardship.

- I am attending an out-of-state college/university and am unable to compete in my home state/province's shows.

College/University Name: _____

College/University City: _____ State: _____

You must provide a written explanation detailing your situation. Attach additional sheets if necessary.

- I live on the border of two states/provinces and it is more economical to show outside of my home state/province.

Name of Bordering State/Province: _____

Mileage to Bordering State/Province: _____

You must provide a written explanation detailing your situation. Attach additional sheets if necessary.

- My trainer resides in another state/province and my horse is boarded out of my state/province of residence.

Trainer's Name: _____

Trainer's City: _____ State: _____

City in which horse is boarded: _____ State: _____

You must provide a written explanation detailing your situation. Attach additional sheets if necessary.

Other

You must provide a written explanation detailing your situation. Attach additional sheets if necessary.

Provide any additional information that may support your hardship application. Attach additional sheets if necessary.

SIGNATURES

1. Applicant

I hereby certify that I am a current member of the American Quarter Horse Youth Association and all information supplied on this form is true and correct. I understand that by applying, I will be considered for approval to represent an affiliate other than my affiliate of residence during the AQHYA World Championship Show and upon approval must comply with the qualifying guidelines of that affiliate and may not stall with or represent my own affiliate. I declare that I have shown or participated with the respective affiliate for which I'm applying during the current qualifying period. **This does not apply to team penning or ranch sorting.** I also understand I must apply each year for approval.

Applicant's Signature

Date

2. Parent/Guardian

I do hereby consent for my minor son/daughter to apply for a change of affiliation of state/province representation during the AQHYA World Championship Show, and in so applying and upon approval by AQHYA, I understand that my son/daughter must comply with the qualifying guidelines of that affiliate and may not stall with or represent our home affiliate. I declare that my son/daughter has shown or participated with the respective affiliate during the current qualifying period. **This does not apply to team penning or ranch sorting.** I also understand my son/daughter must apply each year for approval.

Parent or Guardian's Signature

Date

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3. Youth Advisor of Residency Affiliate

I hereby certify that I am the current AQHYA affiliate youth advisor, according to AQHA records, for the state/province of _____, which is the state/province of residence of the above named youth. I am aware and have informed my membership that this youth has applied to change state/provincial affiliation for the AQHYA World Championship Show.

Youth Advisor of RESIDENCY Affiliate Signature

Date

4. Youth Advisor of Hardship Affiliate

I hereby certify that I am the current AQHYA affiliate youth advisor, according to AQHA records for the state/province of _____, which is the designated hardship state/province for the above named youth. I am aware and have informed my membership that this youth is seeking approval to represent this affiliate during the AQHYA World Championship Show and agrees to conform to affiliate qualifying guidelines. Further, I also certify that this application meets with the approval of the youth membership of this affiliate. I declare that this youth member has shown or participated in our state/affiliate during the current qualifying period. This does not apply to team penning or ranch sorting.

Youth Advisor of HARDSHIP Affiliate Signature

Date