



# 2019 AQHYA Affiliate Information Form

All information on this form must be completed before any individual(s) will be recognized as the official affiliate youth advisor(s) by the American Quarter Horse Association. All documents must be on file with AQHA by **March 1, 2019**.

## State, Province or International Affiliate:

### Affiliate President

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

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

City, State and Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Youth Adviser

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

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

City, State and Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

May we post all of your information on aqha.com and other social media sites?  Yes  No

If not, please indicate which information you DO NOT want posted: \_\_\_\_\_

### Co-Adviser (if applicable)

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

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

City, State and Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

May we post all of your information on aqha.com and other social media sites?  Yes  No

If not, please indicate which information you DO NOT want posted: \_\_\_\_\_

*The following youth must be members of the American Quarter Horse Youth Association.*

### Youth Officers

#### Name

#### AQHYA Member ID #

(Form not accepted without all member ID #s)

President: \_\_\_\_\_

Vice President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Treasurer: \_\_\_\_\_

Sentinel: \_\_\_\_\_

**Voting Delegates**

Name

AQHYA Member ID #

(Form not accepted without all member ID #s)

Delegate 1: \_\_\_\_\_

Delegate 2: \_\_\_\_\_

Delegate 3: \_\_\_\_\_

Delegate 4: \_\_\_\_\_

**Number of youth in affiliate in good standing:** \_\_\_\_\_

**Scan or fax the following documents:**

- Youth affiliate's constitution and bylaws
- Youth affiliate's AQHYA World Championship Show qualifying guidelines
- Youth affiliate's membership list

(These documents must be submitted each year regardless of changes or lack thereof.)

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Affiliate President's Signature

Date

**ALL FORMS DUE BY MARCH 1, 2019.**

**Please complete form and return to AQHYA, Attn: Youth Department, P.O. Box 200, Amarillo, TX 79168.**

If you have any questions please contact AQHA Youth Department.  
Phone: 806-376-4811 Fax: 806-349-6409 E-mail: [youth@aqha.org](mailto:youth@aqha.org)

**APPROVAL OF STATE, PROVIDENCE or INTERNATIONAL AFFILIATE  
YOUTH ASSOCIATIONS**

A youth affiliate is eligible to be recognized and considered in good standing with AQHYA and the AQHYA Advisory Board, when the following general conditions are met:

1. The youth affiliate must be approved by or affiliated with the recognized state, provincial or international AQHA Affiliate.
2. Each youth affiliate shall submit to AQHYA its constitution and bylaws. AQHYA is to be notified of any amendments made to the initially submitted constitution and bylaws.
3. On or before **March 1** each year, each youth affiliate shall submit to AQHYA a list of its youth affiliate officers, youth affiliate membership, AQHYA delegates, affiliate youth advisor(s), and AQHYA World Championship Show qualifying guidelines. Affiliate youth officers and AQHYA delegates must be members in good standing of the AQHYA.
4. No provision of the youth affiliate constitution is in conflict with AQHYA or AQHA constitution, bylaws, or general rules and regulations.
5. Activities are in harmony with the ideals and purposes of AQHYA and AQHA.
6. Membership must be open to all youth 18 years of age and under interested in the equestrian lifestyle.

**\*\*Please have this form approved and signed below  
by the president of your AQHA State, Provincial or International Affiliate. \*\***

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Affiliate President's Signature

Date

**ALL FORMS DUE BY MARCH 1, 2019.**

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