



OQHA Youth Team (NYATT) Application

Must be completed in full

Name: _____

Address: _____

Phone: _____ Email: _____

Date of Birth: _____ Age: _____ AQHYA #: _____

Name of Horse: _____ AQHA #: _____

Name of Horse Owner: _____

Grade This Fall: _____ Name of School You Will Attend: _____

School Activities & Honours: _____

Future Plans/Career Goals: _____

Hobbies: _____

Are you currently/have you ever been involved with or held office with OQHYA or AQHYA? If so, state when and in what capacity: _____

Are you currently/have you ever been involved with any other local or Provincial horse/equine organization? If so, please list: _____

How long have you been riding American Quarter Horses? _____

Have you attended or competed at the All American Quarter Horse Congress in the past? _____

If yes, please briefly describe your experience(s): _____

Have you been a Congress Youth Team (NYATT) member in the past? _____

If yes, please briefly describe your experience(s): _____

Have you read and do you have a working knowledge of the rules and regulations of the AQHYA and OQHYA? _____

Were you able to meet the team requirements of the OQHYA based on the guidelines for the selection of team members? _____

If yes, please answer/explain below:

a. Are you a current OQHA/OQHYA member? _____

b. Did you volunteer 10 hours or more and acquire \$100 in sponsorships for OQHYA (OR raise \$300 in sponsorships in place of volunteering)? _____

If yes, please explain: _____

Note: Sponsor money is to be submitted with this application. An additional fee of \$150 will be required of team members following team selection.

c. Did you participate in 2 or more fundraising events in 2022? _____

If yes, please explain: _____

d. Did you attend two or more OQHYA meeting in 2022? _____

If yes, please state when: _____

If chosen to be a team member:

Would you be willing to abide by the rules and requirements set by OQHA, OQHYA, and Team Advisors for this event? _____

Would you take an active role in preparing for this event including fundraising, attending meetings, and exhibiting a genuine effort to work as a team? _____

Based on your experience as a past team member or any other similar team participation, list any ideas or suggestions you may have to help improve the Congress Youth Team Experience: _____

Please carefully read the guidelines for the selection of the Congress Youth Team. Print clearly or use a computer to fill in the form, and answer all questions to the best of your ability. If needed, feel free to attach an appendix. This form will assist in team selection as well as provide a personal commitment from each applicant.

Please return the completed application **on or before July 15, 2022** by emailing it to Youth Advisory Mallory McKewen at oqhamallory@gmail.com

The OQHYA and Advisor do not assume responsibility for accidents or injury concerning horse or applicant, nor loss or damage of personal property. However, precautions will be taken to assure the safety of everyone involved and to try to make it a positive and memorable experience.

Date: _____

Signature of Applicant: _____

Signature of Parent or Guardian: _____