

Georgia Quarter Horse Youth Association

Intent to Show Form

Completed form and copies are due to Youth Advisor by April 15

You **must** be a current member of Georgia Quarter Horse Association for this form to be valid.

Youth Member Name: _____ Birthdate: _____

Horse's Registered Name: _____ Reg #: _____

Youth Member E-mail: _____ Youth Cell: _____

Parent/Guardian E-mail: _____ Parent Cell: _____

Are you a current Georgia Quarter Horse Association member? **Yes** or **No**

Volunteer Opportunities: GQHA Novice Series Shows, GA State 4-H Horse Show, Big A Horse Show, Georgia on My Mind Horse Show, Summer Kickoff Horse Show. Volunteer hours must be written down, signed by supervisor at that show and sent to GeorgiaQuarterHorse@yahoo.com or the GQHYA Advisor. You may appeal to the Youth Committee in writing to GeorgiaQuarterHorse@yahoo.com in order for other horse related volunteer activities to count.

Please review all eligibility requirements and **check** the events you are interested in participating in.

Parents and youth must initial below to verify they have read and understand.

Youth World Team

NYATT (Congress Team)

_____ 7 Volunteer Hours

2 hour minimum Big A Volunteer Hours PREFERRED - This will count toward a portion of the 7 overall hours, and can be completed by a parent. Volunteer hours have a monetary value of \$25. If you do not meet the required volunteer hours, you are responsible for the value.

_____ \$200 in fundraising contribution

Fundraiser opportunities will be posted on GQHA Youth Facebook page.

_____ 10 point or 3 Show minimum for each class you would like on a State Ticket

If you have not met this requirement, but there is a class you would like a State Spot in, an appeal may be made in writing to the Youth Committee. Send to GeorgiaQuarterHorse@yahoo.com.

State spots will be offered to qualified youth as outlined in the GQHYA rules. Youth who meet these requirements, but have Nationally qualified, will receive the benefits of team membership.

Youth Member Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

SUBMISSION

1 Form per Horse

Copies of AQHA membership card and registration papers must accompany form.

If you are interested in entering the NSBA portions, please include NSBA membership card and license.

Mail to: Georgia Quarter Horse Association

PO Box 49340, Athens GA 30604

E-mail: GeorgiaQuarterHorse@yahoo.com

Text: 706-201-6724

Parent involvement is strongly encouraged. We LOVE parent volunteers!