

## 2023 MQHYA WORLD CHAMPIONSHIP SHOW

### CHANGE OF AFFILIATION

The MQHYA Championship Show Change of Affiliation replaces the former hardship application. It allows MQHYA members to change the affiliate they represent at the Youth World Show.

# This form must be completed fully and must include all required signatures. <u>Incomplete</u> forms may not be allowed for a member's change of affiliation.

Forms must be submitted via email to <u>MontanaQHA@gmail.com</u> by MAY 1, 2023. It is the member's responsibility to ensure completed form is received by MQHYA by the deadline.

#### **APPLICANT INFORMATION**

Applicant's Name:		AQHYA ID#:
Address:		
City	State:	Zip:
Phone Number:	Email:	
Parent/Guardian's Name:		
Phone Number:	Email:	

#### **AFFILIATE INFORMATION:**

My affiliate of residence is:

I request an MQHYA World Show Change of Affiliation to the following AQHYA affiliate:

#### 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 any affiliate of residence. This does not apply to team penning or ranch sorting. I also understand that I must apply each year for a change of affiliation.

Youth Member's Signature

2. Parent/Guardian

I do hereby consent for my minor son/daughter to apply for a change of affiliate of state/providence representation during the AQHYA World Championship Show, and in so applying and upon approval by MQHYA, I understand that my son/daughter must comply with the qualifying guidelines of that affiliate and may not stall with or represent our affiliate of residence. This does not apply to team penning and ranch sorting. I also understand my son/daughter must apply each year for approval.

Parent or Guardian's Signature

Date

Date

#### 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 of , which is the state/providence of residence of the named youth. I am aware and have informed my membership that this youth has applied to change state/providence affiliation for the AQHYA World Championship Show.

Youth Advisor of RESIDENCY Affiliate Signature Date

#### 4. Youth Advisor of Requested Affiliate

I hereby certify that I am the current AQHYA affiliate youth advisor, according to AQHA records for the state/providence of Montana, which is the affiliate requested for the above name 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 the approval of the youth membership of this affiliate. This does not apply to team penning and ranch sorting.

Date