

# American Tobiano Overo Association (ATOA)



## Youth Membership Application

**Eligibility:** Youth Membership is open to individuals ages **8-18** who have an interest in horses, horsemanship, and the Paint Horse industry.

### Youth Member Information

- **Full Name:** \_\_\_\_\_
- **Date of Birth:** \_\_\_\_\_ **Age:** \_\_\_\_\_
- **Mailing Address:** \_\_\_\_\_

  

- **City, State, ZIP:** \_\_\_\_\_
- **Phone Number (if applicable):** \_\_\_\_\_
- **Email Address (if applicable):** \_\_\_\_\_

### Parent / Legal Guardian Information

- **Parent/Guardian Name:** \_\_\_\_\_
- **Relationship to Youth:** \_\_\_\_\_
- **Mailing Address (if different):** \_\_\_\_\_

  

- **Phone Number:** \_\_\_\_\_
- **Email Address:** \_\_\_\_\_

## ATOA Membership Selection

### Youth Membership (Ages 8–18)

*(Youth membership benefits may include eligibility for youth awards, education programs, ambassador opportunities, and special events.)*

- **Membership Year:**  Current Year  Multi-Year
- **Membership Fee:** \$ \$15.00 a year

## Horse & Equine Involvement (Optional)

- **Horse(s) Name(s):** \_\_\_\_\_
- **Breed/Color Pattern:** \_\_\_\_\_
- **Primary Discipline(s):** \_\_\_\_\_

Show  Ranch / Cowboy  Performance  Speed Events  4-H  Pleasure  Other:  
\_\_\_\_\_

## Youth Interests (Check all that apply)

- Horsemanship & Horse Care
- Showing & Competition
- Ranch & Cowboy Events
- Leadership & Public Speaking
- Youth Ambassador Program
- Community Service
- Scholarships & Awards

Online Education & Learning Resources

## Code of Conduct Agreement

Youth members are expected to:

- Demonstrate good sportsmanship and respectful behavior
- Represent ATOA positively at all events and online
- Follow ATOA rules, policies, and youth guidelines

I understand and agree to follow the ATOA Youth Code of Conduct.

## Photo & Media Release

I grant permission for the American Tobiano Overo Association (ATOA) to use photographs, videos, and related media of the youth member for educational, promotional, and marketing purposes.

- **Parent/Guardian Initials:** \_\_\_\_\_

## Parent / Guardian Authorization

I authorize the above-named youth to become a member of the American Tobiano Overo Association. I understand that ATOA is not responsible for accidents, injuries, or losses incurred during participation in activities.

- **Parent/Guardian Signature:** \_\_\_\_\_
- **Date:** \_\_\_\_\_

## Submission Information

Please submit this completed application to:

**American Tobiano Overo Association (ATOA)**

Email: [ATOAPaints@gmail.com](mailto:ATOAPaints@gmail.com)

Address: 789 W M-113, Kingsley, Mi 49649

Phone: 231-620-4042

Please make checks to: ATOA

*Youth memberships are subject to approval and must be renewed annually unless otherwise stated.*