



NCHA Limited t/a

National Cutting Horse Association

APPLICATION FOR NON PROFESSIONAL CARD

Please complete all details and return to:

NCHA

PO Box 3098

WEST TAMWORTH NSW 2340

or office@ncha.com.au

I, Mr, Mrs, Ms, Miss (*circle one*) _____ (*Full name of nominee*)

Membership No: _____ Occupations _____

1. Do you or have you ever received any remuneration? YES / NO
If yes, when was the last time you received such remuneration? _____

2. Have you ever within the last three years ridden a cutting horse in an NCHA Affiliated contest, not owned by you or your family? YES / NO
If yes, completed the following or attach a separate sheet if necessary

Name of the horse: _____

Owner: _____

Entry fees paid: _____ Expenses paid by: _____

Were you paid a fee to show this horse? YES / NO

If yes, how much? \$ _____

Did you receive all or part of premium won? YES / NO

If yes, how much? \$ _____

Did any member of your family receive a fee to train this horse? YES / NO

If yes, how much? \$ _____

3. Do you receive any sources of income for training or showing, conditioning or boarding cutting horses? YES / NO

Signature of Applicant: _____ Date: ____/____/____

The undersigned agrees to become familiar with and be bound by the rules of the National Cutting Horse Association, and expressly agrees to have all disputes related to compliance with or violation of these rules resolved by the procedures provided in the rules.

I understand that a false declaration will result in suspension of NCHA privileges for a period of a minimum of six (6) months for the first offense. It is the member's responsibility to notify the NCHA office immediately upon any change in his/her Non-Professional/Amateur status. Failure to do so could result in loss of Non-Professional/Amateur status for life.

Office Use: Approved for Non Pro Status YES / NO Directors Signature: _____