NATIONAL CUTTING HORSE ASSOCIATION



APPLICATION FOR NON PROFESSIONAL CARD

I, \Box MR \Box MRS \Box MS		(FULL NAME)
MEMBERSHIP NUMBER:	OCCUPATION:	
QUESTIONNAIRE		
1. Have you ever ridden, trained or assisted in training horses or horse riders for remuneration, directly or indirectly?		🗆 YES 🗆 NO
If yes, when was the last time you received	such remuneration?	
2. Have you within the last three years ricontest, not owned by you or your fam	dden a cutting horse in an NCHA Affiliated nily?	
If yes, complete the following or attach a s	eparate sheet if necessary	
NAME OF HORSE:	OWNER:	
ENTRY FEES PAID:	EXPENSES PAID BY:	-
Were you paid a fee to show this horse? If yes, how much \$	_	🗆 YES 🛛 NO
Did you receive all or part of premium wor If yes, how much \$		🗆 YES 🗆 NO
Did any member of your family receive a fe If yes, how much 4		🗆 YES 🛛 NO
3. Do you receive any sources of income boarding cutting horses?	from training or showing, conditioning or	
to have all disputes related to compliance with or v I understand that a false declaration will result in s	d be bound by the rules of the National Cutting Horse A iolation of these rules resolved by the procedures pro uspension of NCHA privileges for a period of a minimu the NCHA office immediately upon any change in his rofessional/Amateur status for life.	ovided in the rules. um of six (6) months for the first
SIGNATURE:	DATE:	
	RETURN FORM TO: <u>admin@ncha.com.au</u> filled in correctly before returning to the NCHA Office	
OFFICE USE:		

Approved for Non Pro Card:
YES NO Directors Signature: _