CALIFORNIA STATE HORSEMEN'S ASSOCIATION, INCORPORATED

Amateur Card Application

MAIL WITH PAYMENT OF $25 TO: CSHA, 1330 W. Robinhood Dr. Suite D, Stockton, CA 95207

Applicant must provide references from three individuals who can personally attest to applicant's qualification as an amateur based on the definition below. All Amateur Cards expire on December 31 of the year issued.

Applicant: _____ **Year of Application:** _____

Address: _____ **City:** _____ **Zip:** _____

Telephone: (_____)_____ **Email:** _____ **Region:** _____

Applicant must be a current member in good standing of the California State Horsemen's Association at the time of application for amateur status (*use the CSHA membership application to join or renew membership)*

Membership Type: [ ] Senior [ ] Family [ ] Life [ ] Club Name of Club:_____

CSHA DEFINITION OF AMATEUR as reprinted from the West Coast Horse Show Rule Book, Section 1.4:

"Exhibitor is 18yrs of age or older as defined in 1.3 and has not received remuneration, monetary or otherwise either directly or indirectly for the previous 3yrs for training, riding, instruction, showing, or judging horses.
Exhibitor must have proof of current amateur status. CSHA or other recognized breed organization cards are acceptable.
Management has the right to deny showing privileges to any person who cannot show proof of amateur status"

1] By my signature below I attest that I have read the definition of AMATEUR written above and that to the best of my knowledge the above named applicant is an Amateur. I further attest that the information provided by me below is true and correct.

Name of party:_____ **Ph#** _____ **Email**_____

Address: _____

I have known the applicant for _____ **years and have personal knowledge of his/her equestrian activities.**

Signature: _____ **Dated:** _____

2] By my signature below I attest that I have read the definition of AMATEUR written above and that to the best of my knowledge the above named applicant is an Amateur. I further attest that the information provided by me below is true and correct.

Name of party:_____ **Ph#** _____ **Email**_____

Address: _____

I have known the applicant for _____ **years and have personal knowledge of his/her equestrian activities.**

Signature: _____ **Dated:** _____

3] By my signature below I attest that I have read the definition of AMATEUR written above and that to the best of my knowledge the above named applicant is an Amateur. I further attest that the information provided by me below is true and correct.

Name of party:_____ **Ph#** _____ **Email**_____

Address: _____

I have known the applicant for _____ **years and have personal knowledge of his/her equestrian activities.**

Signature: _____ **Dated:** _____

I ATTEST THAT ALL THE INFORMATION ON THIS FORM IS TRUE AND CORRECT AND THAT I QUALIFY AS AN AMATEUR AS DEFINED BY THE WEST COAST HORSE SHOW RULES AND PRINTED ABOVE.

Signature of Applicant: _____ **Dated:** _____

For Office Use Only

OFFICE: Received: _____ Check # _____ Amount:_____ Member # _____ Membership year: _____

CHAIR: Approved: _____ Card Issued: #_____ Card Mailed:_____ Region Chair Notified: _____

Rev. 08/25