



**MIDWESTERN HORSEMAN'S SOCIETY
NOVICE EXHIBITOR'S CARD APPLICATION**



(MWHS Membership forms must be completed before completing a Novice Application)

NOVICE ELIGIBILITY REQUIREMENTS:

- A) Applicant must hold a current MWHS Single or Family Membership.
- B) Application must be completed entirely and signed by a MWHS Director.
- C) Applicant must NOT have shown in 40 Open or Breed shows in the last 5 years OR have a strong history of showing.
- D) **NEW! As of January 2017-** Any age rider on a horse 14 hands and over. Age restriction (19 & over) has been removed.

NAME: _____

ADDRESS: _____

City _____ *Postal Code* _____

PHONE: *Home* _____ *Email* _____

MWHS MEMBERSHIP TYPE: _____ **DATE:** _____

- | | | | |
|------|--|------------------------------|-----------------------------|
| 1) | Have you exhibited a horse or horses, of any breed, at open or breed shows at any time in the past? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 1(a) | <i>(If yes - have you shown in more than 40 open or breed shows in the past?)</i> | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 2) | Have you ever shown at a club show? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 3) | Have you ever been paid a fee for riding, training, or exhibiting a horse? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 4) | Has any member of your immediate family had a source of income from the riding, training, exhibiting or boarding of horses? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 5) | Have you instructed a person in riding, driving, training or showing a horse either directly or indirectly at any time? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 6) | Have you judged any horse shows, open, 4-H, or approved breed shows in the past? | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| 6(a) | <i>If yes, did you receive any type of compensation (including but not limited to reimbursement of expenses) for your service?</i> | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

If YES is answered to any of the above questions, please provide a brief explanation and list the open shows that you have attended.

PLEASE NOTE - ANY PERSON BEING DENIED A NOVICE EXHIBITOR'S CARD SHALL HAVE 30 DAYS IN WHICH TO APPEAL.

SIGNATURE OF APPLICANT: _____

MAIL TO: Sheila and Hayley Lampard
 4029 Kimball Rd
 R.R.#1 Corunna, ON
 N0N1G0

EMAIL TO: mwhsmemberships@gmail.com

SHOULD YOU HAVE ANY QUESTIONS REGARDING YOUR NOVICE APPLICATION OR OTHER MEMBER SERVICES, PLEASE DO NOT HESITATE TO CONTACT US!

FOR OFFICE USE ONLY	Novice Application Card Status: (Approved) <input type="checkbox"/> YES <input type="checkbox"/> NO
	Notes: _____
Date Of Decision	_____