



## 2022 AQHYA World Championship Show CHANGE OF AFFILIATION

The AQHYA World Championship Show Change of Affiliation replaces the former hardship application. It allows AQHYA members to change the affiliate they represent at the Youth World Show.

**This form must be completed fully and must include all required signatures. Incomplete forms may not allow for a member's change of affiliation.**

**Completed forms must be submitted via email to [youth@aqha.org](mailto:youth@aqha.org) by **JUNE 1, 2022**.** It is the member's responsibility to ensure completed form is received by AQHA by the deadline. No forms will be accepted after June 1<sup>st</sup>.

### APPLICANT INFORMATION:

Applicant's Name: _____	AQHYA I.D. #: _____
Address: _____	
City: _____	State: _____ Zip: _____
Phone Number: _____	Email: _____
Parent/ Guardian's Name: _____	
Phone Number: _____	Email: _____

### AFFILIATE INFORMATION:

My affiliate of residence is:

\_\_\_\_\_

I request an AQHYA World Show Change of Affiliation to the following AQHYA affiliate:

\_\_\_\_\_

**SIGNATURES:**

**1. Applicant**

I hereby certify that I am a current member of the American Quarter Horse Youth Association and all information supplied on this form is true and correct. I understand that by applying, I will be considered for approval to represent an affiliate other than my affiliate of residence during the AQHYA World Championship Show and upon approval must comply with the qualifying guidelines of that affiliate and may not stall with or represent my affiliate of residence. This does not apply to team penning or ranch sorting. I also understand I must apply each year for a change of affiliation.

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Youth Member's Signature

Date

**2. Parent/Guardian**

I do hereby consent for my minor son/daughter to apply for a change of affiliation of state/province representation during the AQHYA World Championship Show, and in so applying and upon approval by AQHYA, I understand that my son/daughter must comply with the qualifying guidelines of that affiliate and may not stall with or represent our affiliate of residence. This does not apply to team penning or ranch sorting. I also understand my son/daughter must apply each year for approval.

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Parent or Guardian's Signature

Date

**3. Youth Adviser of Residency Affiliate**

I hereby certify that I am the current AQHYA affiliate youth adviser, according to AQHA records, for the state/province of \_\_\_\_\_, which is the state/province of residence of the above named youth. I am aware and have informed my membership that this youth has applied to change state/provincial affiliation for the AQHYA World Championship Show.

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Youth Advisor of RESIDENCY Affiliate Signature

Date

**4. Youth Adviser of Requested Affiliate**

I hereby certify that I am the current AQHYA affiliate youth adviser, according to AQHA records, for the state/province of \_\_\_\_\_, which is the affiliate requested for the above named youth. I am aware and have informed my membership that this youth is seeking approval to represent this affiliate during the AQHYA World Championship Show and agrees to conform to affiliate qualifying guidelines. Further, I also certify that this application meets with the approval of the youth membership of this affiliate. This does not apply to team penning or ranch sorting.

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Youth Advisor of REQUESTED Affiliate Signature

Date