NASMDA Amateur Application

Please print out this form and mail to:
NASMDA, PO Box 324, Cave Springs, AR 72718
Phone: 479.721.3969 or 479.644.1930 . watsonhorseshows@gmail.com
Make checks payable to:



North American Saddle Mule & Donkey Association

YOUR ANIMAL MUST BE REGISTERED WITH NASMDA OR YOU MUST HAVE A LEASE FORM ON FILE BEFORE APPLYING FOR AN AMATEUR CARD.

YOU MUST BE A CURRENT NASMDA MEMBER TO APPLY FOR AN AMATEUR CARD.

Registered N	Name:R	Registration Number:		
	embership (\$30) 🔲 Renew Membership (\$30) - NASM	DA Card Number:		
☐ New Ama	nateur Card (\$20) 🔲 Renew Amateur Card (\$20) - Amat	teur Card Number:		
	Silver (over 50) Birthdate:			
	Novice exhibitors cannot have earned 10 or more points	-		
perf	rformance class or Youth or Amateur combined or their el			
	Applicants are responsible for verifying eligibility. Halte		-0	
	Member Amateur Card fee: \$20 • Amateur Card + NAS			
-	Cards expire on 12/31 of year of application. To renev	w a card, send fee by that da	te)	
Farm Name	e (If Applicable)* Extra \$10 if you want it registered	d/listed (One time fee)		
Namo:				
	Occupation:			
	Ph			
City:	St	tate: Zip:		
Email:				
Spouse's na	State: Spouse's occupation: te: NASMDA rule 147.E states "An amateur exhibitor may not show, train or assist in the training of a mule or donkey for which their spouse is accepting any form of remuneration.") Statement of Eligibility – Please Read Carefully and Answer ALL Questions No Have you accepted payment, directly or indirectly, for judging, riding, training, exhibiting, schooling, or driving			
(Note: I				
☐ Yes ☐ No	 Have you accepted payment, directly or indirectly, for judging, riding of a horse/mule/donkey at any time during the past 5 years (60 mor 		iving	
☐ Yes ☐ No	Have you instructed another person, or conducted a seminar in ridir	e)		
□ Vaa □ Na	horse/mule/donkey at any time during the past 5 years (60 months)			
☐ res ☐ No	 Have you shown, trained, or assisted in the training of a horse/mule accepted any form of payment, either directly or indirectly, for the training 		ıg of	
	said animal any time during the past 5 years (60 months)?			
∐ Yes ∐ No		nsportation, mileage, etc.) been paid	by	
	Are you now, or have you ever been approved as a horse show jud			
∐ Yes ∐ No	Have you judged any horse/mule/donkey shows, open, 4-H, or approv	ved breed shows during the past 5 yea	ırs?	
If you answered	ed "Yes" to any of the questions above, please explain fully (use additi	ional paper if necessary):		
			-	
7/-				
Please list	lave any of your expenses (including but not limited to lodging, transportation, mileage, etc.) been paid by omeone else other than family members? Are you now, or have you ever been approved as a horse show judge by any breed or show association? lave you judged any horse/mule/donkey shows, open, 4-H, or approved breed shows during the past 5 years? Yes" to any of the questions above, please explain fully (use additional paper if necessary): any amateur cards & numbers held by you in any other horse/mule/donkey organization:			
		, 0		

In submitting this application for status in the NASMDA Amateur Exhibitor Program I hereby affirm that the information contained herein is true and correct. I understand that my status in the NASMDA Amateur Program and my NASMDA Amateur card are revocable. I understand that the animal(s) I will show must meet the recorded owner requirements according to the NASMDA rulebook, must have completed transfer of ownership prior to showing of any animal, and leased or co-owned (other than immediate family) are ineligible. Should the Association find that, for any reason, I am no longer eligible to compete in NASMDA approved Amateur classes, I agree to surrender said card to the Association immediately upon request. Furthermore, should I no longer be eligible for Amateur status for any reason, I will refrain from exhibiting in the corresponding classes and I agree to voluntarily surrender my NASMDA card to the Association without request. Failing to do so, I am subject to possible disciplinary action under the general rules of the Association. By signing this application, I acknowledge responsibility for knowledge of NASMDA rules regarding the Amateur program.

Signature of Applicant (sign in ink):					Date:			
METHOD OF PAYMENT:								
☐ Che	ck 🗌 Paypal	☐ Visa	☐ MasterCard	☐ Disc	over			
Card Number:			Exp. Date:		_ CVC:			
Name:	Signature:							
Address:								
Email:								