



**ARHA Professionals Application,
Code Of Ethics, and Survey**
Membership expires December 31st

MISSION STATEMENT: The goal of the ARHA Professionals is to bring together the Ranch Horse Professionals to govern and uphold ethics and to develop and set up new policy so that they may better serve the Ranch Horse industry.

We, the members of the American Ranch Horse Association Professionals, in carrying out our role of providing service to the Ranch horse industry, recognize the need to do so in a professional manner, and to work with the public and our colleagues with the highest degree of integrity. Therefore, we have set forth the following code of ethics which shall govern our endeavors to fulfill our obligations. By signing this application, I agree to be bound by the rules of the ARHA Professional Code of Ethics. I understand that in order to participate in this program, I must maintain a continuous individual membership with ARHA.

As a member of the ARHA Professionals, I will:

- Adhere to the professional standards of the ARHA and work to further its goals and objectives.
- Insure that the welfare of the Ranch Horse is paramount and that every horse shall, at all times, be treated humanely and with dignity, respect and compassion.
- Conduct all business affairs with integrity, sincerity, and accuracy in an open and forthright manner.
- Act with integrity in dealings with clients, other professionals, and the public. In this regard, any horse shown by my spouse, client, or child will be economically owned as prescribed by the ARHA rules.
- Handle our business operations in a manner in which promotes the image of the Ranch Horse Industry.
- Instill confidence among clients and the public in the Ranch Horse industry, avoiding any action conducive to discrediting it or membership in the ARHA.

By signing below, I agree to the policies and decisions made by the ARHA Professionals and agree to the guidelines.

Applications Signature _____

ARHA ID#: _____ Date: _____

Annual Membership Cost: \$25.00
(\$10.00 to ARHA administrative cost and \$15.00 to ARHA Professionals fund for promotions and awards.)
Please include check, money order, or credit card payment.

Applicant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Email: _____

Website: _____

Memberships (other organizations): _____

Judging: With what associations do you hold a card?

Training: Youth Non Pro Open

Services Offered: Training Showing Lessons

If Lessons: Open Non Pro Youth

History: _____

Number of years you have been a trainer: _____

Number of years you have been a riding instructor: _____

Other disciplines you train in: _____

FOR OFFICE USE ONLY:

Date Rec'd: _____ Database: _____

Amt. Paid: _____ Website: _____

Check #: _____ Mailed: _____

_____ PayPal Billing _____ Credit Card:

Mail to:

ARHA Professionals

PO Box 186

Nancy, KY 42544

Phone: 606-271-2963