

COMMITTEE MEMBER APPLICATION

Complete this application and return it with all necessary documentation to the Appaloosa Horse Club (ApHC) office by January 20th.

ApHC membership#:	Years held:
Name:	
Address:	
Email:	
Phone:	
Occupation:	
	e related activities you are or have been a member of and
years active:	
Leadership roles you have held in any	of the above clubs or activities:
1	
2	
3	
4	
Do you have any family members curre	ently serving on an ApHC committee? If yes, please list:
	

REFERENCES:

Please provide one letter of support from any of these options:

- A Regional ApHC club Officer, Show Manager, or Board Member
- A current or past member of the ApHC Board of Directors
- A person in a leadership role with an organization where you have had a significant volunteer role

In the space provided below please tell the Committee information about your area(s) of expertise which you believe qualifies you to serve as an ApHC Committee Member:
Please list the committees you are interested in serving in order of preference:
1.
2.
3.
Verification by Applicant:
By signing below, I verify that I am currently a member in good standing and agree that, if appointed as a Committee Member, I will:
*Carry out my role in a professional manner when dealing with colleagues, the membership and the public. *Adhere to the ApHC professional standards.
*Work to further the goals and objectives of the ApHC.
*Assist in serving the ApHC in a courteous and helpful manner. *Be active in the ApHC community through attendance and/ or participation in events.
*Actively participate in the Committee to which I am appointed. *Maintain confidentiality when necessary.
*Agree that my name and contact information may be published by the ApHC. *Agree to abide by ApHC Rules & Regulations.
If appointed as a Committee Member, I agree that I will maintain an ApHC membership, remain in good standing throughout my appointment, and be subject to the ApHC rules of membership and committee member conduct.
I hereby certify that the statements recorded in this application are true and accurate. I understand that if any statement presented is untrue, I may be disqualified from being considered to serve on a committee or be removed from such committee.
Signature of Applicant Date

Complete and return this Application and Letter of Reference to: Appaloosa Horse Club

Appaloosa Horse Club
Attn: Committee Services
2720 Pullman Road, Moscow, ID 83843
phone: (208) 882-5578ext. 249
submit by email: ceo@appaloosa.com