

# INDIANA QUARTER HORSE ASSOCIATION HORSEBACK RIDING/DRIVING PROGRAM

1. To participate in the IQHA Horseback Riding/Driving Program you must be a member of the Indiana Quarter Horse Association. An active membership must be maintained during the time that you accumulate hours.
2. There is a one-time \$20.00 enrollment fee.
3. The horse you ride or drive in this program must be registered in the American Quarter Horse Association. You do not have to own the horse. You may accumulate hours in IQHA's program at the same time you are accumulating hours in the AQHA Horseback Riding Program, if you are enrolled in both.
4. The AQHA registered name and registration number of the horse must be on the log sheets.
5. You may ride more than one quarter horse. Separate log sheets must be kept for each horse.
6. All time logged is on a one horse – one rider basis and is on the honor system. An accurate record of the time you actually spend riding or driving must be reported on your official IQHA Horseback Riding Program Log Sheets (copies of AQHA log sheets are accepted). Your hours carry over from year to year as long as you maintain your IQHA membership. Submit log sheets by December 1<sup>st</sup> each year.
7. Members who log time on a State or National trail (as recognized by the State of Indiana or US National Parks) earn **bonus hours**. For every hour you spend riding or driving in an Indiana State Park or National Park you receive one bonus hour. (Double hours). You must name the park in your log. You also receive **bonus hours** for participating in an **AQHA approved Trail Ride. The coordinator awards the bonus hours.**
8. The Indiana Quarter Horse Association will recognize achievement winners at its Annual Awards Banquet. The following levels will be recognized:

50 Hours – Certificate & patch	750 Hours – Gift Certificate & patch	2500 Hours - Gift Certificate & patch
100 Hours – Certificate & patch	1000 Hours – Plaque & patch	3000 Hours – Plaque & patch
250 Hours – Gift Certificate & patch	1500 Hours – Gift Certificate & patch	3500 Hours – Gift Certificate & patch
500 Hours – Gift Certificate & patch	2000 Hours – Gift Certificate & patch	4000 Hours – Gift Certificate & patch
	5000 Hours – Buckle	

Annual achievement levels will be listed in the IQHA Directory and on the website.

9. To enroll, complete the attached form and return it with the appropriate fees. You'll receive your Official Log Sheets (copies of AQHA log sheets are accepted). These may be copied as needed. Enrollment in AQHA's Horseback Riding Program is not required, but is encouraged. **Start earning State and National recognition for doing what you love, riding or driving your quarter horse!**

For further information on the IQHA Horseback Riding/Driving Program contact Roberta Ancil, 408 E Kendall St, LaFontaine, IN 46940 phone 765-669-0967 [rancil115@gmail.com](mailto:rancil115@gmail.com) or visit [www.iqha.com](http://www.iqha.com) log sheets are available on-line.

For further information on the AQHA Horseback Riding Program, contact American Quarter Horse Association, PO Box 200, Amarillo, TX 79168 (806) 376-4811 Fax (806) 349-6411. For more information about AQHA and its activities visit [www.aqha.com](http://www.aqha.com).



## YES, enroll me in the IQHA Horseback Riding/Driving Program

I am currently an IQHA member  Please enter my IQHA membership

Name \_\_\_\_\_ email \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home phone \_\_\_\_\_ cell \_\_\_\_\_ County of residence \_\_\_\_\_

Birth date \_\_\_\_\_ AQHA ID # (if known) \_\_\_\_\_ Social Security # \_\_\_\_\_

*(youth members)*

Horseback Riding/Driving Program – one time enrollment fee \$20.00 \$ \_\_\_\_\_

Membership in IQHA – annual dues \$35.00 - Family or Single \$ \_\_\_\_\_

*(Family includes spouse & children 18 & under)*

Spouse \_\_\_\_\_ Child \_\_\_\_\_ Birthday \_\_\_\_\_

Child \_\_\_\_\_ Birthday \_\_\_\_\_ Child \_\_\_\_\_ Birthday \_\_\_\_\_

**Total Enclosed** *check payable to Indiana Quarter Horse Association* \$ \_\_\_\_\_

**Credit Card Payment** – *Circle One* - Master Card Visa Discover Card. Card number \_\_\_\_\_

Expiration Date \_\_\_\_\_ 3-didget code \_\_\_\_\_ Name on Card \_\_\_\_\_

Send to:  
Roberta Ancil, 408 E Kendall St, LaFontaine, IN 46940  
765-669-0967 [Rancil115@gmail.com](mailto:Rancil115@gmail.com)