

**TRAINER APPLICATION**

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ \* Must provide two phone numbers.

Email: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Drivers License: \_\_\_\_\_ State: \_\_\_\_\_ MHF Membership \_\_\_\_\_ ID #: \_\_\_\_\_

\*Mustang Heritage Foundation annual membership is required in order to train or compete in MHF programs. An application is included and can be submitted along with your TIP application. Annual membership is \$35 and is tax deductible as allowable by law.

**Contact information provided below will be shared publicly to encourage adopter communication:**

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Website: \_\_\_\_\_ Facebook: \_\_\_\_\_

Questionnaire: *All questions must be completed. Please feel free to use additional pages if necessary. MHF may complete a background check on applicants.*

1. How many years have you trained horses/burros? \_\_\_\_\_
2. Have you ever been accused or convicted of animal or human abuse/neglect/cruelty? \_\_\_\_\_
3. Are you a professional or have you received compensation for training? \_\_\_\_\_
4. Have you trained a wild horse or burro received directly from an adoption or BLM facility (not a Mustang or burro that had previous gentling or training)?  
\_\_\_\_\_
5. Do you have any equine related licenses or certifications? (CHA, Protégé certificate, collegiate level certification, etc.)  
\_\_\_\_\_
6. Do you currently have any untitled mustangs or burros at your facility, if so, how many?  
\_\_\_\_\_
7. Do you compete in horse related events? If so, which disciplines/breeds do you compete in?  
\_\_\_\_\_
8. Have you won awards and/or recognition in these disciplines?  
\_\_\_\_\_
9. Do you or a family member own the facility where you will be training the Mustang(s) or Burro(s)? Y / N
10. Please submit, using another sheet of paper, a short trainer bio and a short explanation as to why you think we should select you as a trainer for this program.

**I have read and agree with the 2018 Mustang Heritage Foundation Trainer Incentive Program Rules and Regulations and agree to comply.**

**By signing below I am stating that I am aware and in agreement that participation in this event is by invitation only; therefore, the Board of Trustees has the unqualified right to determine eligibility and can, at any time, remove a contestant from a Mustang Heritage Foundation program and competition for any or no reason at all. I am also stating that all questions above have been answered honestly by the trainer applying for this competition.**

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_



**Please submit to:**  
 Mustang Heritage Foundation - Membership  
 P.O. Box 979, Georgetown, TX 78627  
 Office: (512) 869-3225  
 Fax: (512) 869-3229

**2018 MEMBERSHIP APPLICATION**  
**12-Month Annual Membership**  
**Oct. 1, 2017 – Sept. 30, 2018**

All fields must be completed with correct information. Any missing information will delay the processing of your application. Only one applicant per application. Please select your desired membership level:

- \$35 Friend of the Foundation**  
 - Designed for trainers & individuals  
 - Custom membership card  
 - Official member decal  
 - \$5 ticket & merchandise discounts  
 - Exclusive updates from the Executive Director

- \$100 Champion of the Foundation**  
 - Designed for individuals  
 - All of the Friend benefits, plus:  
 - Membership profile featured in MHF publications  
 - Priority seating at MHF events

- \$250 Partner of the Foundation**  
 - Designed for supporting organizations/families  
 - All of the Champion benefits, plus:  
 - Receive quarterly updates from the Executive Director  
 - Membership profile featured in MHF publications and website  
 - Invitation to exclusive MHF events

- \$1,000 Lifetime Friend of the Foundation**  
 - One-time individual membership designed for lifetime recognition  
 - All of the Partner benefits, plus:  
 - Lifetime Friend of the Foundation apparel piece

FIRST NAME\*: \_\_\_\_\_ LAST NAME\*: \_\_\_\_\_

ORGANIZATION/FAMILY NAME\*: \_\_\_\_\_  
 \*As it should appear on the membership card

Were you a 2017 member of the Mustang Heritage Foundation? If so, please provide your membership number: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

COUNTRY: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_  
 Please provide a valid email address, as it will be the main source of communication for information, newsletters and coupons.

DATE OF BIRTH (MM/DD/YYYY): \_\_\_\_\_ PHONE: \_\_\_\_\_

Do you currently own any titled mustangs? \_\_\_\_\_ If yes, how many? \_\_\_\_\_

Have you previously, or do you plan on, *participating* in a MHF training program? \_\_\_\_\_

Have you previously, or do you plan on, *adopting* through a MHF training program? \_\_\_\_\_

**PAYMENT:** Payment is due at time of application. The membership year begins October 1 and ends September 30 and is renewable annually. Cash payment is not accepted; money order, credit card or check only. **Membership dues paid to Mustang Heritage Foundation are non-refundable, 100% tax deductible and can be considered a charitable contribution on your individual tax return.** Through payment of membership dues you acknowledge that membership through MHF is voluntary and does not give the member voting rights.

Check/Money Order (Payable to: Mustang Heritage Foundation)

Credit (Visa, MasterCard, American Express, Discover)

Card Holder Name: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Mustang Heritage Foundation - TIP Program

### TRAINER REFERENCE FORM

If the individual providing the reference would like for the information to remain confidential, please feel free to mail this form directly to the Mustang Heritage Foundation, P.O. Box 979, Georgetown, TX 78626. Fax: 512-869-3229 Office 512-869-3225 Email: [tip@mustangheritagefoundation.org](mailto:tip@mustangheritagefoundation.org)

Name of Applicant: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

Ref. Home Phone: \_\_\_\_\_ Ref. Alternate Phone: \_\_\_\_\_

Ref. Email Address: \_\_\_\_\_

1. How long have you known this trainer?

\_\_\_\_\_

2. How often do you see this trainer ride or work horses?

\_\_\_\_\_

3. Do you feel that their facilities are suitable for working with a wild horse or burro?

\_\_\_\_\_

4. Do you have any concerns about the animals in the care of this trainer?

\_\_\_\_\_

5. Would you recommend this trainer to people with unbroken or difficult horses or burros?

\_\_\_\_\_

\_\_\_\_\_

Personal Comments: (Regarding skill, work ethic, values, etc.)

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

Personal Comments: (Regarding skill, work ethic, values, etc.)

\_\_\_\_\_

\_\_\_\_\_

## Mustang Heritage Foundation Humane Treatment Policy

Every Mustang and all animals shall, at all times, be treated humanely and with dignity, respect and compassion. Any participant using abusive or excessive training techniques or being inhumane to a Mustang or Burro in his/her care (determined excessive or abusive by a panel assigned by the Mustang Heritage Foundation and consisting of a panel of licensed equine veterinarian(s) and/or respected horse industry professionals) may be removed from the program and/or all future contests and training programs. If a participant's animal enters the contest or if the trainer/participant at any time presents an animal with questionable training/care related injuries (determined excessive or abusive by a panel assigned by the Mustang Heritage Foundation and consisting of a panel of licensed equine veterinarian(s) and/or respected horse industry professionals) the participant may be removed from the contest and/or all future contests and training programs.

The following list includes but is not limited to examples of unacceptable behavior and training techniques:

- No mustang or burro appearing to be emaciated, drawn or injured may be exhibited.
- Use of or evidence of inhumane training techniques or methods such as striking animal with objects, excessive spurring and/or excessive jerking of reins.
- Any inhumane treatment that results in wounds.

Additionally, the Mustang Heritage Foundation promotes and encourages the following examples of sound, compassionate, and successful training techniques and handling methods:

- Mustang/Burro and trainer exhibiting solid relationship based on respect and understanding
- A calm and willing partnership between Mustang/Burro and trainer, regardless of the obstacle or environmental challenge during competition or training phases
- Trainer maintains a credible level of dignity for the Mustang/Burro during all phases of training, competition, and repositioning if applicable.
- Trainers are expected to seek and employ methods of horsemanship in order to promote and encourage the positive relationship between Mustang/Burro and trainer.
- Training techniques should demonstrate a strong bond between Mustang/Burro and trainer

Through my signature below, I certify that I have read and understand the Mustang Heritage Foundation Humane Treatment policy, and agree to abide by these principles as a participant in Mustang Heritage Foundation events. I also understand that should a determination be made (as outlined above) that I have violated any part of this policy, I may lose the privilege of competing at MHF-sponsored events, and may also lose the privilege of any future adoptions of Mustangs or Burros.

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Name of Trainer (please print)

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Trainer's Signature

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Date of Signature

## MHF AND BLM FACILITY REQUIREMENT FORM

Trainer Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Adopter Name (if trainer is a youth) \_\_\_\_\_  
Mail Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Interested in training horses or burros? \_\_\_\_\_  
How many untitled horses/burros are at the facility location: \_\_\_\_\_ Adopted (untitled): \_\_\_\_\_ TIP: \_\_\_\_\_ EMM: \_\_\_\_\_  
Birthdate: \_\_\_\_\_ (SSN, DL and DOB info will be required at pickup if needed)

Question 1: Describe your facility and transportation

**a) Corral**

Dimension: Length: \_\_\_\_\_ Width: \_\_\_\_\_ Height of Corral: \_\_\_\_\_  
Gate Height: \_\_\_\_\_ Gate Width: \_\_\_\_\_  
Materials used in Corral: \_\_\_\_\_ Materials used in Gate: \_\_\_\_\_

**b) Shelter**

Dimension: Length: \_\_\_\_\_ Width: \_\_\_\_\_  
Maximum Height: \_\_\_\_\_ Minimum height: \_\_\_\_\_ Gate height: \_\_\_\_\_ Gate width: \_\_\_\_\_  
Materials used in Shelter: \_\_\_\_\_  
Attached to corral? Yes \_\_\_\_\_ No \_\_\_\_\_ If not attached, how is it accessible: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**c) Feed**

Type of hay or pasture: \_\_\_\_\_ How much per day: \_\_\_\_\_  
Supplemental feed: \_\_\_\_\_

**d) Water**

Tank capacity (gallons): \_\_\_\_\_ Automatic water - Y N Source of water: Well \_\_\_ City \_\_\_  
Other: Describe: \_\_\_\_\_

**e) Trailer**

Brand name and year (if known): \_\_\_\_\_ Animal capacity: \_\_\_\_\_  
Type: Stock \_\_\_\_\_ Slant \_\_\_\_\_ Other (describe) \_\_\_\_\_  
Interior Length \_\_\_\_\_ Interior Width \_\_\_\_\_ Interior height \_\_\_\_\_ Covered with \_\_\_\_\_  
Number of rear doors: \_\_\_\_\_ Ramp Y - N Rear doors: (circle one) Full height, Half height, ¾ height.  
\*\*\* Horses are normally not loaded into a trailer with a ramp.

Draw a map to location where horse will be kept (from the nearest major highway)

Draw a detailed layout of the corral and shelter where the horse will be kept.

\*Address of facility if different: \_\_\_\_\_  
Direction to facility: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_