

CMSA Professional Horsemen Application

Name: _____ Phone: _____

Address: _____ Phone: _____

City: _____ State: _____ ZIP: _____

Web address: _____

Country: _____ Email address: _____

AQHA Identification Number: _____ Other ID numbers you may have: _____

Mission Statement

To enhance and promote the industry of professionals involved in the sport of cowboy mounted shooting and the services involved in those equine services of the sport. This association exists to foster credibility and proficiency while being the advocates for the sport of mounted shooting through the endorsement of superior industry standards that will enable professionals to excel in the sport.

CMSA Professional Horsemen Association Membership Rules

- Membership in the CMSA PHA is a privilege not a right. It is subject to continual review by the CMSA PHA and/or the Executive Board of that association. Membership may be terminated by the CMSA PHA and/or Executive Board with or without formal notice or hearing.
- By becoming a member of the CMSA PHA, such member agrees and understands that the industry and clients of mounted shooting expect a higher standard of conduct. As such, each member agrees that the Association and/or Board has the right to investigate complaints regarding a member's conduct. Furthermore, members must cooperate in the investigation and abide by the decisions concerning application or revocation of membership by the association and/or Executive Board.
- The undersigned does willfully waive any right he/she may have to require disclosure to him/her by the Association or any information obtained to evaluate him/her as a professional, agreeing that the accuracy of the information is correct concerning the undersigned character, reputation, and horsemanship abilities.
- Professional horsemen must maintain a current year or life, individual CMSA membership.
- Professional horsemen must compete in at least 4 CMSA matches per year. In order to meet the requirement, at least 2 of the 4 matches must be either: a State Championship, Regional Championship, or National Championship/Classic.
- CMSA Professional Horsemen will be issued a card in place of the CMSA pro card. The same rules apply, however, all proceeds from the issuance of CMSA PHA cards go towards the development of the CMSA PHA.

CMSA Professional Horsemen Association Code of Ethics

We the members of the CMSA Professional Horsemen Association, do recognize that in carrying out our role in providing service to the sport of cowboy mounted shooting we are held to higher standards of integrity, sportsmanship, and professionalism. Therefore, the following guidelines have been established to govern our actions.

- To adhere to the professional standards of the Cowboy Mounted Shooting Association and to work to further its goals and objectives.
- To ensure the welfare of the horses in the sport is paramount and that every horse is treated humanely and with dignity, respect, and compassion.
- To conduct all business dealing with integrity, sincerity, and accuracy in an open and forthright manner.
- To act with honesty in financial dealings with clients, other professionals and the public.
- To fully disclose to clients the actual sales price and commission involved in the sale and purchase of each horse.
- To not charge a commission or monetary value from both the buyer and seller of a horse.
- To handle our business dealings and communications (including social media) in a manner that promotes the sport of Cowboy Mounted Shooting in a positive image.
- To install confidence among clients and the general public in the Mounted Shooting Industry, while avoiding any action to discredit the membership of the sport of Cowboy Mounted Shooting.

By signing this application, I agree to be bound by these rules and Code of Ethics of the CMSA Professional Horseman Association. I understand in order to participate in this program I must maintain a continuous membership with CMSA.

Applicant's Signature: _____ Date: _____

YEARS OF OPERATION

Years as a trainer: _____ Years as a riding instructor: _____ Years as a breeder: _____ Years as a jockey: _____

Years at current location: _____

If less than two years, list previous location:

Address: _____

City: _____ State: _____ ZIP: _____

MEMBERSHIPS:

- AQHA Affiliate
- National Barrel Horse Association
- National Reining Horse Association
- National Thoroughbred Racing Association
- AQHA Racing Affiliate
- National Cutting Horse Association
- National Snaffle Bit Association
- U.S. Dressage Federation
- USA Equestrian Inc.
- National Reined Cow Horse Association
- Professional Rodeo Cowboys Association
- Women's Professional Rodeo Association
- World Conformation Horse Association
- Other Associations: _____

References: References are required from two current CMSA Professional Horsemen, two clients, and a National Advisory Director. These references will be contacted by CMSA Professional Horsemen Association.

CMSA Professional Horseman

Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

CMSA Professional Horseman

Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Client Reference

Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

Client Reference

Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

CMSA National Advisory Board

Name: _____

Address: _____

City, State, ZIP: _____

Phone: _____

Email: _____

SERVICES OFFERED: (fill in all that apply)

- Conditioning for sales
- Boarding/Layups
- Mare care/Foaling services
- Stallion Services
- Frozen/Cooled Semen
- Embryo Transfer
- Breaking
- Training/ Finishing
- Horse Shoeing
- Horse Auctions/Sales
- Other: _____

TRAINING/INSTRUCTING

Lessons: ___ Beginning ___ Intermediate ___ Advanced Horsemanship

Do you have lesson horses available: ___ Yes ___ No

Are you a member of a Trainer/Instructor Certification Program? ___ Yes ___ No

If yes, please list the programs: _____

Other services (please specify): _____

HORSE SALE REFERRAL:

Do you want to be referred for horse sales? ___ Yes ___ No

If yes, you must complete the financial information below and abide by the following statement:

As an expressed condition to referral of potential customers by CMSA, the undersigned agrees not to charge or receive a monetary commission, or other remuneration constituting a commission from both the buyer and seller of a horse involved in the transaction in which the undersigned is representing a client in the purchase or sale thereof.

The undersigned agrees the violation of the expressed condition constitutes a violation of the Code of Conduct requiring integrity in financial dealing with clients, other professionals and the public, and shall be grounds for removal from membership in the Association of AQHA Professional Horsemen.

How do you market your horses? (fill in all that apply)

___ Private Treaty ___ Public Sales ___ Production Sales

Price range of horses for sale: (fill in all that apply)

___ \$5,000 or under ___ \$5,001-\$10,000 ___ \$10,001-\$25,000 ___ more than \$25,000

Are you a current, individual CMSA Member? Yes No

If so, list your membership ID #: _____

Please mark below the Professional Horsemen membership you wish to obtain:

1-year membership \$50 3-year membership \$120

Signature: _____ Date: _____