## **COMMITTEE INTEREST FORM**

UNITED STATES HUNTER JUMPER ASSOCIATION



Name:		USHJA I.D. #			
Phone:	Email:		Zone #:	State:	
Age:   18-25   26-39   56 and over    Discipline:   Hunter   Jumper	<ul><li>□ American Indiar</li><li>□ Asian</li><li>□ Black/African A</li><li>□ Hispanic or Lati</li></ul>			$\square$ Elect not to identify my racial	
Primary role as participant in our		TOT FACILIC ISTAILUET	Uligili Ul	etililioity	
	Competition Management	<ul><li>□ Professional (Rider or Translater)</li><li>□ Other (name)</li></ul>			
If you are involved in competition	s as an exhibitor, which do	you regularly compete in:			
	National (former A)	Regional I (former B) and	d Regional II (	former C)	
Please list non-equine related bus	siness expertise				
Please list equine related governa volunteer work (USHJA and other o	-	last 10 years such as task fo	rces, commit	ees and other	
Please list non-equine related gov	vernance experience within	1 the last 10 years.			
Horse welfare, Sport integrity, Saf health and future of USHJA and ou and the work of the committee(s)	r sport. What is your positi	on on each of these principle	s and their im	portance to USHJA	
Please indicate your area of gove	rnance interest (select all that	apply)			
☐ Owners	☐ Hunter Sport Issues ☐ Amateurs ☐ Finance	<ul><li>☐ Horse and Human Wellbe</li><li>☐ Licensed Officials</li><li>☐ Professionals</li><li>☐ Other</li></ul>	eing	<ul><li>□ Breeders</li><li>□ Rules</li><li>□ Education</li></ul>	

Please email form to CommitteeInterest@ushja.org or you may fax or send a hard copy to USHJA

Provide name and contact information of two equine industry professional references.