



Gypsy Vanner Youth Delegate Application Form

Personal Information:

Full Name

GVHS Region

Date of Birth

Email Address

Phone Number

Address

Country

Are you currently a GVHS member? Y N

Please prepare a document answering the following questions in your own words:

Experience:

How long have you been involved with Gypsy Vanner horses?

Describe your experience with Gypsy Vanner horses, including any competitions, clinics, or events you have participated in.

Have you owned or worked with Gypsy Vanner horses? If yes, please provide details.

Leadership:

Have you held any leadership positions in equestrian organizations, clubs, or groups? If yes, please describe.

Describe any involvement you have had in promoting or advocating for the Gypsy Vanner Horse:

Why do you want to become a Gypsy Vanner Youth Delegate?

What motivates you to represent the Gypsy Vanner Horse Society as a youth delegate?

How do you envision contributing to the goals and objectives of the Gypsy Vanner Youth Delegate Program?

Recommendation:

Please include two statements of recommendation. At least one must be from someone who is an equine professional. Neither may be from a parent or guardian. The statements should discuss why you should be selected as GVHS Regional Youth Delegate including. The statements should be clearly signed and include the telephone number of the signer.

Declaration:

I declare that the information provided in this application is true and accurate to the best of my knowledge. I understand that submission of this application does not guarantee selection as a Gypsy Vanner Youth Delegate, and acceptance into the program is subject to review and approval by the Gypsy Vanner Horse Society.

Signature:

[Your Full Name]

Date:

PARENTAL CONSENT

I am the parent / guardian (circle one) of the person listed above and give my consent for my child to serve as GVHS Youth Delegate.

Date _____ Parent Signature _____

Please print _____