Jim Payne Memorial Trophy
‘Making the Best Better”

Guidelines for Application:

- The Jim Payne Memorial Award is all about “Making the Best Better.” This award will be awarded to a youth who has been an AMHA member for at least 2 years and is at least 10.

- This particular individual is passionate about miniature horses, demonstrates good sportsmanship, and is an active participant in the AMHA community. This youth should be driven to succeed, however, is humble and accepting whether he or she wins or loses.

- He or she must have self-made horses who are trained and conditioned by only the youth or family. He or she must be involved in all aspects of training, grooming, and show preparation while showing. If the youth has a horse professionally trained, that youth is still eligible to receive this award as long as they also have self-trained horses. Ideally, this youth should compete in multiple disciplines of competition.

- This youth should be respectful, motivated to learn and exhibit a good attitude. He or she must be receptive to advice and criticism offered by others. Lastly, he or she makes every effort to support other fellow youth and promote showing in a positive manner.

- With each application the youth must submit a three paragraph essay, along with the number of years they have been a member and number of years exhibiting.
  The first paragraph of the essay should include what he or she enjoys about miniature horses and what got he or she involved with showing.

  The second paragraph should include challenges that he or she has encountered and how they overcame those obstacles working with miniature horses.

  The third paragraph should describe ways or ideas that he or she believes would engage more youth to participate in AMHA and how they have already helped promote the AMHA miniature horses.

Entries can be sent via email at info@amha.org or submitted to the AMHA Show Office at the World Show no later than NOON on the Saturday of the youth competition. All entries must be typed and neatly presented.

APPLICANT INFORMATION

Applicant’s Name: _________________________________________________________
AMHA ID#: _______________________________ Member Since:_________________
Address: _________________________________________________________________
City: _________________________     State/Province: _____________________
Zip/Postal Code: _______________    Telephone: _______________________
Email: _______________________________________________
Age (as of Jan 1st this year): _________ Date of Birth: ___/___/_____