

## THE AMERICAN MINIATURE HORSE ASSOCIATION, INC.

5601 S Interstate 35 W ◆ Alvarado, Texas 76009 (817) 783-5600 ◆ FAX (817) 783-6403 http://www.amha.org

## AMHA AOTE/Youth Mentoring Opt-Out Declaration Form

I have chosen to opt out of the AMHA AOTE/Youth Mentoring program listed below. I understand by doing so, that I can not be mentored again under the AOTE/Youth mentoring program until the next calendar year.

Effective Date			
AOTE Y	OTE		
AMHA Program In Which You	Mentor or are being M	entored	
Name			
Address	City	State	Zip
	,		<del></del> r
Phone Number Email address			
-			
Signature			
AOTE Opt Out Fee: Fees are p	ayable in U.S. funds or	nly and must accompany	y form.
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AOTE Opt Out Fee- \$10.00 per	r program.		
☐ Check or Money Order	□ CC		
Credit Card No.:	Cvv_	Expiratio	n Date:
Name on Card: Applicant agrees to abide by all the Rules.	Sign:	ature:	irectors or its appointee

Please see the  $\Lambda MH\Lambda$  Rule Book for complete AMHA AOTE Rules.