

**PROFESSIONAL'S CHOICE - NHSPA or NHSPA-JR
SMB Elite™ Equine ATHLETE OF THE MONTH APPLICATION**

When completing this application, please type or print using black or blue ink. Entries must be received by **May 1, 2008** to be eligible. Incomplete or illegible entries will not be considered. You must be an active member of NHSPA or NHSPA-JR in good standing to be eligible for this award. **Your horse does not have to be registered to be considered for this award.** Put your application, name, and photo of your horse in Professional's Choice SMB Elite™ Equine Athlete of the Month via NHSPA or NHSPA-JR, 12001 Logan Street, Suite 200, Denver, CO 80234.



Please circle the logo that matches your Division
(Blank Spaces will result in points being taken away)

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE (____) _____ EMAIL _____

AGE _____ GRADE _____

HORSE'S NAME AND/OR NICKNAME _____

HORSE'S AGE _____ HORSE'S BREED _____

EVENTS YOUR HORSE WORKS _____

HOW LONG HAVE YOU OWNED THE HORSE? _____

AWARDS OR ACCOMPLISHMENTS THIS HORSE HAS ACHIEVED OR HELPED YOU
ACHIEVE _____

LIST ANY "VOLUNTEER" ACTIVITIES THIS HORSE IS INVOLVED IN (e.g., Parades, Special Kids/
Festivals, Therapeutic Riding, etc.) _____

SPECIAL TALENTS, "TRICKS" OR TRAITS YOUR HORSE IS KNOWN FOR

DESCRIBE ONE PERSONALITY TRAIT YOU AND YOUR HORSE SHARE AND GIVE AN
EXAMPLE OF WHY YOU FEEL THAT WAY _____

**Essay Question: TELL US WHY YOUR HORSE SHOULD BE SELECTED AS THE PROFESSIONAL'S
CHOICE SMB ELITE™ EQUINE ATHLETE OF THE MONTH. (100 words or less) (Please attach a
separate document for your essay.)**