



Missouri Fox Trotting Horse Breed Assoc., Inc.

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Professional Status Application

I hereby certify that I am in compliance with the definition of a Professional as currently stated in the Rules, Standards & Policies of the MFTHBA

Printed Name _____

Signature _____

Street Address _____

City, State, Zip _____

Day Phone # _____ Member # _____

Please refer to the MFTHBA Rules, Standards & Policies book for fee Schedule.
Application and appropriate fees must be received before request can be processed. One must have a current MFTHBA membership.

Current Professional Card Fee is \$20

Receipt # _____