



Mustang Heritage Foundation  
PO Box 979  
Georgetown, TX 78626  
Phone: 512-869-3225  
Fax: 512-869-3229

## TRAINER APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_ Age: \_\_\_\_\_

*\*Must be 18 yrs. old to apply*

**Circle One:** Male / Female      **Marital Status:** Married / Single

Questionnaire: **All questions must be completed.**

*Please feel free to use the reverse side and/or additional pages if necessary.*

1. How many years have you trained horses? \_\_\_\_\_
2. Are you a professional or have you received compensation for training? \_\_\_\_\_
3. Have you trained a wild horse or Mustang received directly from an adoption or BLM facility (not a Mustang that had previous gentling or training)? \_\_\_\_\_
4. Do you currently have any untitled mustangs at your facility, if so, how many?  
\_\_\_\_\_
5. Do you compete in horse related events? If so, which disciplines/breeds do you compete in?  
\_\_\_\_\_  
\_\_\_\_\_
- Have you won awards and/or recognition in these disciplines?  
\_\_\_\_\_
6. Do you or a family member own the facility where you will be training the Mustang?
7. Please submit, using another sheet of paper, a short trainer bio and a short explanation as to why you think we should select you as a trainer for this program.
8. Please email or attach a photo of yourself with this application for promotional purposes.

*By signing below I am stating that I am aware and in agreement that participation in this event is by invitation only; therefore, the Board of Trustees has the unqualified right to determine eligibility and can, at any time, remove a contestant from a Mustang Heritage Foundation program and competition for any or no reason at all. I am also stating that all questions above have been answered honestly by the trainer applying for this competition.*

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

MHF AND BLM FACILITY REQUIREMENT FORM

Trainer Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_

Question 1. Describe your existing facility and transportation:

a) **Corral**

Dimension: Length \_\_\_\_\_ Width \_\_\_\_\_ Height of Corral \_\_\_\_\_

Gate Height \_\_\_\_\_ Gate Width \_\_\_\_\_

Materials used in Corral \_\_\_\_\_ Materials used in Gate \_\_\_\_\_

b) **Shelter**

Maximum Height \_\_\_\_\_ Minimum Height \_\_\_\_\_ Gate Height \_\_\_\_\_ Gate Width \_\_\_\_\_

Materials used in Shelter \_\_\_\_\_

Attached to Corral? Yes No; If not attached, how is it accessible? \_\_\_\_\_

c) **Feed**

Type of Hay or Pasture \_\_\_\_\_ Amount per Day \_\_\_\_\_

Supplemental Feed \_\_\_\_\_

d) **Access to Water**

Water Tank Size \_\_\_\_\_ Source of Water \_\_\_\_\_

e) **Trailer**

Interior Length \_\_\_\_\_ Interior Width \_\_\_\_\_ Interior Height \_\_\_\_\_

Covered with \_\_\_\_\_ Type of Doors \_\_\_\_\_

**Draw a map to the location where animal will be kept (from the nearest major highway).**  
N

**Draw a layout of corral(s) and shelter(s)**  
N

Directions to facility: \_\_\_\_\_

Physical Address: \_\_\_\_\_

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## TRAINER REFERENCE FORM

If the individual providing the reference would like for the information to remain confidential, please feel free to mail this form directly to the Mustang Heritage Foundation, P.O. Box 979, Georgetown, TX 78626.  
Fax: 512-869-3229

Name of Applicant: \_\_\_\_\_

Name of Reference: \_\_\_\_\_

Ref. Home Phone: \_\_\_\_\_ Ref. Alternate Phone: \_\_\_\_\_

Ref. Email Address: \_\_\_\_\_

1. How long have you known this trainer?

\_\_\_\_\_

2. How often do you see this trainer ride or work horses?

\_\_\_\_\_

3. Do you feel that their facilities are suitable for working with a wild horse?

\_\_\_\_\_

4. Do you have any concerns about the horses in the care of this trainer?

\_\_\_\_\_

5. Would you recommend this trainer to people with unbroken or difficult horses?

\_\_\_\_\_

\_\_\_\_\_

Personal Comments: (Regarding skill, work ethic, values, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

Personal Comments: (Regarding skill, work ethic, values, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_