

# Intermountain Wild Horse & Burro Advisors, Inc. / IWHBA

## Advisor Enrollment / Membership Application

Name:		City:	State/Zip:
Address:			Birthdate:
Telephone:		Email:	
Exp. Level: (Note 1)	Ok to publish city / telephone? YES / NO	OK to publish email? YES / NO	

**Liability Release - (Must be signed):** I understand that being around horses/burros is inherently dangerous because they are living creatures and are not predictable. In consideration of being permitted by IWHBA to participate in programs or activities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against, sue or attach the property of IWHBA or any of their principals, agents, employees or representatives, for injury or damages resulting from negligence or other acts, conditions, or circumstances, howsoever caused, by any principal, agent, employee, or representative of IWHBA. I do hereby release the above named from any claim or right of damages which might occur to me, my minor children, my spouse or animals.

### OTHER FAMILY MEMBERS TO BE INCLUDED

Name:	Birthdate:
Name:	Birthdate:
Name:	Birthdate:
Name:	Birthdate:

**(EACH FAMILY MEMBER NEEDS TO FILL OUT A SECTION ON PAGE 2.)**

I hereby apply for membership in Intermountain Wild Horse & Burro Advisors, Inc. / IWHBA and agree to abide by the policies and procedures adopted by BLM and IWHBA.	Please send completed application and payment to:
_____ (Applicant or Head of Household)	IWHBA c/o Janet Tipton 4912 N. Hazel Circle Erda, UT 84074
_____ (Date)	

### Membership Fees

* Single Advisor Membership	\$15.00
* Family Advisor Membership	\$30.00
*Non-Participating Sponsor (please enter amount)	

**Notes:**

1. Experience levels higher than contact advisor will be verified. (Please see the last page)
2. All memberships expire on December 31st.

Please make checks payable to: **Intermountain Wild Horse & Burro Advisors, Inc.**

IWHBA OFFICE USE ONLY				
YEAR:	SINGLE / FAMILY	AMT. PAID	CHECK #	DATE

## Additional Family Member Enrollment Form

This section is used to enroll participating family members (other than the original Family Membership applicant.) Please have each participating member print his or her name in the space below and sign, be sure to sign below for any minor children, and submit this form with your Membership Application.

**For the purpose of this application, a "Family Member" may be any person who lives permanently in the same family household as the applicant and is under 21 years of age.**

I (*name*) \_\_\_\_\_ hereby apply for membership in Intermountain Wild Horse & Burro Advisors, Inc. and agree to abide by the policies and procedures published by BLM and IWHBA.

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**

I (*name*) \_\_\_\_\_ hereby apply for membership in Intermountain Wild Horse & Burro Advisors, Inc. and agree to abide by the policies and procedures published by BLM and IWHBA.

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**

I (*name*) \_\_\_\_\_ hereby apply for membership in Intermountain Wild Horse & Burro Advisors, Inc. and agree to abide by the policies and procedures published by BLM and IWHBA.

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**(Date)**

### APPROVAL FOR MINOR CHILDREN:

I hereby grant permission for my minor child/children, named above, to participate in the Intermountain Wild Horse & Burro Advisors, Inc. program and activities.

\_\_\_\_\_  
**(Parent / Guardian Signature)**

\_\_\_\_\_  
**(Date)**

## EXPERIENCE LEVELS

Experience ratings are to help us refer specific problems to an appropriate advisor. Rating classifications are:

- Level I**            Contact advisor, helps make referrals, assists at adoptions and other programs; no hands-on experience needed.
- Level II**            Prior wild horses adopter &/or someone with relevant horse gentling experience but whose proficiency has not been formally rated.
- Level III**            Good horse handling skills, has gentled several wild horses him/herself, can solve most basic problems.
- Level IV**            Clinician level; has advanced problem solving and teaching experience, can demonstrate with with fresh wild horses and teach others.
- Participant**        Someone who wishes to participate in events and activities but who does not wish to perform as an advisor.