

**USTA YOUTH DELEGATE APPLICATION**

Please scan and return by email to [Ellen@HHYF.org](mailto:Ellen@HHYF.org) or by mail to:

*Harness Horse Youth Foundation  
217 East Main Street  
Sudlersville, MD 21668*

**Name**

**Address, City, State, Zip**

**Email Address, Cell Number**

**Birthdate, Age**

**Parent(s) / Guardian(s) Name**

**Are you currently a USTA member, either youth or full membership? If so, what is your membership number?**

**Briefly describe your involvement in harness racing (250 words or fewer).**

**Briefly explain why you are interested in serving as a USTA Youth Delegate (250 words or fewer).**

**Do you need documentation of community service hours for school related purposes (examples National Honor Society, college resumes)?**

Please include a statement of recommendation from your USTA District Director, a horsemen's group representative, trainer, driver, breeder or other person involved with racing. Statement should discuss why you should be selected as USTA Youth Delegate including your harness racing experiences and passion for racing. Statement should be clearly signed and include the telephone number of the signer.

**PARENTAL CONSENT**

I am the parent / guardian (circle one) of the person listed below and give my consent for my child to serve as USTA Youth Delegate.

**Youth Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent Signature** \_\_\_\_\_

**Please print** \_\_\_\_\_