

# INTERNATIONAL ASSOCIATION OF PROFESSIONAL FARRIERS INC.

PO Box 223661, West Palm Beach, FL 33422 Phone: (859) 533-1465 or (561) 909-7689 Fax: (888) 972-1806  
[www.ProfessionalFarriers.com](http://www.ProfessionalFarriers.com) [www.ProfessionalFarriers.ca](http://www.ProfessionalFarriers.ca) E-mail: [IAPF@ProfessionalFarriers.com](mailto:IAPF@ProfessionalFarriers.com)

PLEASE PRINT:

☐ **NEW MEMBER**

☐ **RENEW MEMBER**

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: (*circle*)      Male      Female      Suffix (Sr, Jr, II, III): \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Spouse's First Name: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Website Address: \_\_\_\_\_ T-Shirt Size (Adult Sizes) \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Preferred Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

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

Business Address: ☐ Check box if same as Home Address \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Your Profession: (*circle*)    Farrier    Veterinarian    Supplier    Other: \_\_\_\_\_

☐ Check this box if you do NOT want your name on the "Search for Farriers" section of the website.

Certifications from Other Associations (*Please check all Certification levels which you have received. We want to recognize you for your previous achievements.*):

- |  |  |
|--|--|
| <input type="checkbox"/> AFA Certified Farrier (CF)                          | <input type="checkbox"/> Diploma of the Worshipful Company of Farriers (DipWCF)                |
| <input type="checkbox"/> AFA Certified Tradesman Farrier (CTF)               | <input type="checkbox"/> Master Farrier of the Worshipful Company of Farriers (Master Farrier) |
| <input type="checkbox"/> AFA Certified Journeyman Farrier (CJF)              | <input type="checkbox"/> Associate of the Worshipful Company of Farriers (AWCF)                |
| <input type="checkbox"/> AFA CJF Therapeutic Endorsement (CJF TE)            | <input type="checkbox"/> Fellow of the Worshipful Company of Farriers (FWCF)                   |
| <input type="checkbox"/> AFA CJF Educators Endorsement (CJF EE)              | <input type="checkbox"/> Fellow of the Worshipful Company of Farriers with Honors (FWCF Hons)  |
| <input type="checkbox"/> AFA CJF Forging Endorsement (CJF FE)                | <input type="checkbox"/> Certified Euro-Farrier (CEF)  |
| <input type="checkbox"/> Cert III Farriery ACM30517 (Australia)              | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> Cert IV Farriery ACM40818 (Australia)               |  |
| <input type="checkbox"/> Cert III Training & Assessment TAE40116 (Australia) | <input type="checkbox"/> Other: _____  |
| <input type="checkbox"/> FITS Certified Farrier (CF)                         |  |
| <input type="checkbox"/> FITS Advanced Skills Farrier (ASF)                  |  |
| <input type="checkbox"/> Guild Registered Farrier (RF)                       |  |
| <input type="checkbox"/> Guild Registered Journeyman Farrier (RJF)           |  |

Year Started as a Farrier or Veterinarian: \_\_\_\_\_

If Farrier or Veterinarian, I am currently:    ☐ Full Time    ☐ Part Time    ☐ Student    ☐ Retired

Referred to IAPF by: \_\_\_\_\_

Farrier/Vet School Graduate of: \_\_\_\_\_

Year of Graduation: \_\_\_\_\_ If Current Student, Date of Graduation: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Disciplines / Specialties** (Please select all that apply. This information will be used for the "Search for Farriers" section of our website.):

- |  |   |
|--|---|
| <input type="checkbox"/> Carriage Driving                      | <input type="checkbox"/> Show Horse – Hackney             |
| <input type="checkbox"/> Corrective/Therapeutic                | <input type="checkbox"/> Show Horse – Missouri Foxtrotter |
| <input type="checkbox"/> Donkeys & Mules                       | <input type="checkbox"/> Show Horse – Morgan              |
| <input type="checkbox"/> Dressage                              | <input type="checkbox"/> Show Horse – Spanish Sporthorse  |
| <input type="checkbox"/> Endurance                             | <input type="checkbox"/> Show Horse – Walking Horse       |
| <input type="checkbox"/> Eventing                              | <input type="checkbox"/> Steeplechase                     |
| <input type="checkbox"/> Farm (Brood Mare, Foals, Young Stock) | <input type="checkbox"/> Western – ALL Disciplines        |
| <input type="checkbox"/> Foxhunting                            | <input type="checkbox"/> Western – Barrel Racing          |
| <input type="checkbox"/> General/Pleasure                      | <input type="checkbox"/> Western – Cutting                |
| <input type="checkbox"/> Hunter/Jumper                         | <input type="checkbox"/> Western – Pleasure               |
| <input type="checkbox"/> Mounted Police Horse / Military Horse | <input type="checkbox"/> Western – Pole Bending           |
| <input type="checkbox"/> Paso Fino                             | <input type="checkbox"/> Western – Reining                |
| <input type="checkbox"/> Polo                                  | <input type="checkbox"/> Western – Roping                 |
| <input type="checkbox"/> Ponies                                | <input type="checkbox"/> Western – Trail Riding           |
| <input type="checkbox"/> Racing – Arabian                      | <input type="checkbox"/> Western – Other                  |
| <input type="checkbox"/> Racing – Quarter Horse                | _____   |
| <input type="checkbox"/> Racing – Standardbred                 | <input type="checkbox"/> Work/Draft                       |
| <input type="checkbox"/> Racing – Thoroughbred                 | <input type="checkbox"/> Trimming ONLY                    |
| <input type="checkbox"/> Show Horse – American Quarter Horse   |   |
| <input type="checkbox"/> Show Horse – American Saddlebred      |   |
| <input type="checkbox"/> Show Horse – Arabian                  | <input type="checkbox"/> Other: _____                     |
| <input type="checkbox"/> Show Horse – Friesian                 |   |

**Levels of Membership** (check level you are applying for):

- \_\_\_\_ Regular – 1 Year: \$200      \_\_\_\_ Regular – 2 Years: \$350  
\_\_\_\_ Regular – 3 Years: \$500      \_\_\_\_ Regular – 4 Years: \$600 (pay for 3 years; get 1 year free)  
\_\_\_\_ Regular Life Member – One Time Payment - \$2,000

- \_\_\_\_ Household Member – Two Family Members with Same Address - \$300 per year  
\_\_\_\_ Student Member (Farrier or Veterinarian) – \$150  
\_\_\_\_ Associate Member (Other Interested Individual) – Annual - \$200 per year  
\_\_\_\_ Associate Life Member – One Time Payment - \$2,000

\_\_\_\_ **Please also enroll me for the IAPF Foundation Credential – \$75 (if paid at same time as new or renewing membership). Otherwise cost of Foundation Credential is \$100.**

Amount of Check (please attach): \$ \_\_\_\_\_ Check # \_\_\_\_\_  
Amount to charge on Credit Card: \$ \_\_\_\_\_ Cash \$ \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Expiration: (MM/YYYY): \_\_\_\_ / \_\_\_\_

Name on Card: \_\_\_\_\_ Security Code (3 or 4 digits): \_\_\_\_\_

Billing Address: \_\_\_\_\_

Billing City: \_\_\_\_\_ State/Prov: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Signature: \_\_\_\_\_

☐ Check this box if you wish for us to retain this credit card info to use for future renewals or purchases.