

# MASTERS OF FOXHOUNDS ASSOCIATION OF AMERICA ANNUAL QUESTIONNAIRE FOR HUNTS

**DATE DUE - JUNE 15th, 2011**

Answers to this questionnaire are used to edit annual directories published in Baily's Hunting Directory online, in Covertside, and in the MFHA Master's and Huntsmen's Directory.

Listed below is a copy of the material that will be sent to the publications listed above. Please complete all questions and, you may annotate "no change" if applicable.

1 NAME OF HUNT (in full) \_\_\_\_\_

PRIMARY HUNT CONTACT NAME \_\_\_\_\_

2 MAILING ADDRESS \_\_\_\_\_  
*(for MFHA Office use)*

PUBLICATION ADDRESS \_\_\_\_\_  
*(for use in publications and on the MFHA website)*

3 HUNT ATTIRE \_\_\_\_\_ 4 EVENING ATTIRE \_\_\_\_\_

5 ACTIVE MASTERS. List full name and address, telephone numbers and email for each active Master. For a new Master, indicate the year he or she entered office. Do NOT include Honorary, Emeritus or Field Masters in this list. All active Masters must become members of the Association to be listed. If more space is needed, attach an additional sheet of paper. List all emails and phone numbers and indicate home, office, or fax. **Also indicate any numbers or email you DO NOT wish to be published.**

\_\_\_\_\_ **YR ELECTED** **NAME OF MASTER** \_\_\_\_\_

OCCUPATION \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE (include area code) 1) \_\_\_\_\_ 2) \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

\_\_\_\_\_ **YR ELECTED** **NAME OF MASTER** \_\_\_\_\_

OCCUPATION \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE (include area code) 1) \_\_\_\_\_ 2) \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

\_\_\_\_\_ **YR ELECTED** **NAME OF MASTER** \_\_\_\_\_

OCCUPATION \_\_\_\_\_ SPOUSE'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TOWN, STATE, ZIP CODE \_\_\_\_\_

TELEPHONE (include area code) 1) \_\_\_\_\_ 2) \_\_\_\_\_

FAX \_\_\_\_\_ EMAIL \_\_\_\_\_

In order to avoid misunderstanding with regard to this questionnaire, how many active Masters do you now have? .....

6 MASTERS OUT OF OFFICE. If there is a Master who was listed in last year's directory but who should not be in this year's directory, please give that person's name and the year he or she left office:

\_\_\_\_\_

7 HONORARY SECRETARY (Only one secretary will be listed)

Full name \_\_\_\_\_ Email \_\_\_\_\_

Address, town, state, & zip code \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ (Home \_\_\_ or Office \_\_\_) Fax (\_\_\_\_\_) \_\_\_\_\_

8 & 9 NAME OF HUNTSMAN (Professional, MFH or Honorary):

Full Name: \_\_\_\_\_ Professional \_\_\_ MFH \_\_\_ Honorary \_\_\_

SPOUSE'S NAME: \_\_\_\_\_ Email \_\_\_\_\_

Address, town, state & zip code: \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ (Home \_\_\_ or Office \_\_\_) Fax (\_\_\_\_\_) \_\_\_\_\_  
(attach another sheet of paper if necessary)

10 NAME OF WHIPPERS-IN'S (Professional or Honorary):

Full Name: \_\_\_\_\_ Professional \_\_\_ Honorary \_\_\_

Address, town, state & zip code: \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ (Home \_\_\_ or Office \_\_\_) Fax (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_  
(attach another sheet of paper if necessary)

11 NAME OF KENNELMAN (DO NOT list if also listed as a huntsman or whipper-in)

Full Name: \_\_\_\_\_ Professional \_\_\_ Honorary \_\_\_

Address, town, state & zip code: \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ (Home \_\_\_ or Office \_\_\_) Fax (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_  
(attach another sheet of paper if necessary)

Please examine replies to questions about your Hunt staff carefully. Are the names LEGIBLE? Is each status, honorary or professional, clear? If the number of whippers-in reported occupies excessive space, it will be shortened.

12 FOXHOUNDS. Report the number of entered COUPLES which you anticipate you will have in your pack this coming season. Answer in couples (a couple is two hounds). Total must be reported.

AMERICAN	_____
PENN-MARYDEL	_____
ENGLISH	_____
CROSSBRED	_____
TOTAL	<table border="1" style="width: 60px; height: 30px; border-collapse: collapse;"></table>

13 KENNELS. Town, county, state or province where your kennels are located. Be specific but do not give more detail than you wish to have published. This is considered to be the location of your Hunt and will be used to update the MFHA Hunt map online.

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14 TYPE OF HUNTING. (Circle ALL that apply)

Drag      Red Fox      Grey Fox      Coyote      Bobcat      Boar      Other Prey: \_\_\_\_\_

15 SEASON. Please give an answer that will be true this season, such as "mid-September" or "early November" rather than "September 5th" or "November 4th". \_\_\_\_\_ through \_\_\_\_\_

16 DAYS OF MEETS: \_\_\_\_\_

17 ARE VISITORS PERMITTED TO HUNT? \_\_\_\_\_ If yes, publication will read: "Visitors permitted to hunt - for details contact the Honorary Secretary." Or, write below the terms under which visitors may hunt:

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18 How many times did your hounds go out HUNTING during the last season for the benefit of the field, suitable notice having been previously given? This is the figure that is published in The Chronicle. This number should match your fixture cards.



19 What was the average number of persons who hunted with your hounds, exclusive of Master and staff, during the last season .....

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20 What was the largest number of persons on any one Hunt, exclusive of any joint meet with another Hunt .....

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21 Approximately how many different persons hunted with you last season .....

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22 DESCRIPTION OF COUNTRY. Write a short description - mention the area, (in approximate width and length in miles), location by county or region, types of obstacles, distinctive terrain, type of horse most suitable. Your answer is subject to editing and cannot be of abnormal length.

23 HUNT BUTTON. If your button or logo is not satisfactorily reproduced in Covertside, send a full size button image to the Association office. You may also email an electronic file (preferably JPEG) to office@mfha.com.

These questions are not intended for publication but are for internal use by the MFH Association. They concern the internal government and operation of Hunts. They should be answered each year because the previous year's answers are not kept in a permanent file.

24 NAME OF HUNT \_\_\_\_\_

25 TYPE OF ORGANIZATION: (incorporated, non-incorporated, private pack \_\_\_\_\_

(if non-profit please include type i.e., 501(c)3, 501(c)4, etc) \_\_\_\_\_

26 HOUNDS ARE THE PROPERTY OF: \_\_\_\_\_

27 KENNELS ARE THE PROPERTY OF: \_\_\_\_\_

28 NUMBER OF MEMBERS OR SUBSCRIBERS: \_\_\_\_\_

29 IS THE HUNT GOVERNED BY A COMMITTEE (OR BOARD) ELECTED BY MEMBERS? \_\_\_\_\_

IF NOT, HOW IS THE HUNT GOVERNED? \_\_\_\_\_

30 NAME OF PRESIDENT OR CHAIRMAN: \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ (Home \_\_\_ or Office \_\_\_) Fax (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

31 NAME OF TREASURER: \_\_\_\_\_

Address \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ (Home \_\_\_ or Office \_\_\_) Fax (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

32 DATE OR MONTH OF ANNUAL MEETING: \_\_\_\_\_

33 WHAT PROCEDURE IS FOLLOWED IN SELECTING A MASTER?

Elected by members at an annual meeting \_\_\_\_\_ Appointed by Committee or Board \_\_\_\_\_ Other \_\_\_\_\_

34 DO THE MASTERS HAVE FULL CHARGE OF ALL HUNTING OPERATIONS, such as employing and dismissing Hunt employees, scheduling meets, etc? \_\_\_\_\_

35 IF NOT, HOW ARE SUCH MATTERS HANDLED? \_\_\_\_\_

36 LAST NAME OF **MASTER** TO WHOM HUNT FEES SHOULD BE SENT: \_\_\_\_\_

37 LAST NAME OF **MASTER** IN CHARGE OF FOXHOUND REGISTRATION & FEES: \_\_\_\_\_

38 LAST NAME OF **MASTER** TO WHOM QUESTIONNAIRE SHOULD BE SENT: \_\_\_\_\_

39 SIGNED \_\_\_\_\_

*print if not legible*

Capacity \_\_\_\_\_ Date \_\_\_\_\_

QUESTIONNAIRE ADDENDUM – 2011

HUNT NAME: \_\_\_\_\_

1. Does the Hunt have liability insurance?    \_\_\_Yes        \_\_\_No
2. Name of insurance carrier \_\_\_\_\_
3. Does Hunt have a website? If yes: \_\_\_\_\_
4. If you have Professional staff, please answer the following:
  - a. Do they have Workman’s Compensation insurance?    \_\_\_Yes    \_\_\_No
  - b. Do they have medical insurance?    \_\_\_Yes    \_\_\_No
  - c. Do they have some kind of retirement plan?    \_\_\_Yes    \_\_\_No
  - d. Cash salary (**DO NOT** include housing & other perks) \_\_\_\_\_
5. Do you hunt on any public land? (County, State & Federal)    \_\_\_Yes    \_\_\_No
6. Does the Hunt pay MFHA Subscribing Member dues for its membership? \_\_\_Yes    \_\_\_No  
If yes, please list point of contact below  
Name: \_\_\_\_\_ Email: \_\_\_\_\_ Phone: \_\_\_\_\_
7. If your hunt has a 501 (non-profit) status, please circle the corresponding ‘C’ number.  
(C)3    (C)4    (C)5    (C)6    (C)7    (C)8    (C)9
8. Are there horses available to hire near your hunt?    \_\_\_Yes    \_\_\_No  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_
9. Does your kennel receive a state or federal inspection?    \_\_\_Yes    \_\_\_No
10. How many females, males and children hunt with you? (please indication quantity below)  
    \_\_\_females    \_\_\_males    \_\_\_children
11. Does the Hunt test for Leishmaniasis?    \_\_\_Yes    \_\_\_No