RHBAA-HIO AFFILIATION APPLICATION

RHBAA-HIO
P.O. Box 622
Hartselle, AL 35640
(256) 616-2009
info@rhbaa-hio.com
www.rhbaa-hio.com

Name of
Show_____

Show Date_____

Show Location (including City & Zip Code) _____

Sponsoring Organization_____

Show Manger/Chairman:

Name_____

Address_____

City, State, Zip_____

Home Phone_____

Business Phone_____

Fax_____

E-Mail_____

Show Secretary:

Name_____

Address_____

City, State, Zip_____

Home Phone_____

Business Phone_____

Fax_____

E-Mail_____

Person to whom Show Packet (class sheets, judge's cards, etc.) should be mailed, if other than show manager.

Name_____

Address_____

City, State, Zip_____

One Judge_____ or _____ Three Judges

1. I/we agree to abide by the Rules of the RHBAA-HIO and to use Judges(s) currently licensed by our association
2. I/We agree to honor the DQP assigned by the RHBAA-HIO in accordance with current USDA regulations. Said DQP will relive the sponsoring organization of liability per the Horse Protection Act.
3. I/We also agree to submit to the Association the items listed below within fifteen (15) days after the date of our show.

A Copies of each Class Sheet, with the winner marked to: P.O. Box 622 Hartselle, AL 35640

B Completed Show Manager's Report (furnished by the RHBAA-HIO)

C Total affiliation fees ($6.00 per entry)

4. Application must be made at least 30 days prior to the show
5. A printed copy of our class sheet is attached to this application. (For class sheets prepared using a computer, also please attach a copy on CD)
7. $70 Affiliation fee is sent with this application.

I hereby submit application to affiliate the above named horse show with the RHBAA-HIO.

Signature_____Date_____