

Paso Fino Horse Association, Incorporated

1003 Twilight Trail, Suite 2, Frankfort, KY 40601 (859) 689-3700 Fax: (859) 689-3702

info@pfha.org

www.pfha.org

SHOW APPROVAL - FINAL APPLICATION FOR NON-USEF SHOWS

SHOW INFORMATION						
Name of Show:						
ow Date(s): Hosting Region/Ind./Group(s):						
show Venue:						
Address:						
City:	_ State:	Country:	Zip co	ode:		
Type of Show: (Please choose one) Local (L) All Paso (AP) All Breed (AB)	Would you like a PFHA Sho & Secretary Handbook? Yes No	w Management	Will this sh)	?	
Important Note: All information on the fordays prior to the date of the show to avoid an AP Show, a check for \$150 per complete	paying double fees. Any info	ormation on the f	orm may be use	d for publication by t	he PFHA. Fo	
PFHA LICENSED OFFICALS AND SHO JUDGES: INDIVIDUAL CONFERR Name of Judge:	TO MANAGEMENT.		be submitted to	class schedule, show date to the Executive Director fo Number (For Office Use 0	r approval***	
Please list any/all guest judges and dates	that they are judging if app	licable:				
Please list any/all learner judges and/or st	tewards that will be attend	ng, and dates, if a	applicable: _			
STEWARDS: USEF ID # Name of Steward:	Show	Contact/Manage	r: USEF ID#			
Nets Chaus with more than 250 houses in	Name	e:				
Note: Shows with more than 250 horses in payer's steward's report must have 2 steward		ess:	C+-+-			
year 3 steward 3 report mast have 2 steward	s listed City.		State.	/in code.	_	
Show Secretary: USEF ID #	s listed. City:_ Phon	e:			-	
Name:	s listed. City:_ Phon Emai	e: !:			-	
	s listed. City:_Phon Emai	e: !:	presentative: \	JSEF ID #	-	

Please include a list of names and contact information for this show's hearing committee (5-7 people).						
Name (First and Last):	Phone Number:	Email Address:				
Per USEF Affiliate Agreement, any competition, U	SEF or non USEF Competition, sho	ow organizers must enter an agreement with PFHA to				
comply with participant requirements per section	2.26 of the USEF/PFHA Affiliate	Agreement.				
Center for SafeSport or USEF sus grounds and made to leave if the the grounds but prohibited from	pension or banned lists. Such inc ey enter, except individuals on th participating. This includes any o umulation, award programs, or c	d prohibits participation by anyone on the U.S. lividuals must be prohibited from entry on the medical suspension list who may be present on competitions that USEF AFFILIATE recognizes qualification, or any competition that USEF				
Show Contact Signature:		Date:				
Executive Director:		Date:				
and that the Safe Sport Expiration dates must fall		o show will be approved without the information listed				
Judges:	USEF ID #:	Dates of S.S Expiration:				
Character (1/2)						
Steward(s):						
Show Secretary						
·						
Show Contact/ Manager:						
	_					
For Office Use Only: PFHA Competition Number: The Show submitted on this form has been: ApprovedNot Approved Comments for Approval/Non-Approval:						
Executive Director:		Date:				

Instructions for processing this form and Show Procedure Outline on Next Page

GUEST JUDGES:

- 1. The show management may apply to have a Guest Judge officiate a PFHA event.
- 2. If applying to have a guest judge, the PFHA must be notified in writing (either email or mail) at least 90 days prior to the start date of the show.
- 3. The guest judge notification will be presented to the Judges and Stewards Committee for approval if received 90 days prior to the start date of the show.

SHOW PROCEDURE OUTLINE:

To hold a Paso Fino Horse Association (PFHA) sanctioned show, the show must be sponsored by one of the PFHA Regions.

- 1. Information needed to apply: Date, Location, Show Classification, Responsible Contact Person, appropriate fees, **class schedule**, and names of Judges, Stewards and Show Secretary.
- 2. 90 Days Prior to Show: If you plan to use a Guest Judge (official NOT licensed with the PFHA), the request must be received at the PFHA Show Department 90 days prior to the start date of the show.
- 3. 60 Days Prior to Show: The following information must be at the PFHA office: Judge(s), Steward(s), Show Secretary, Show Contact and List of Classes. Show officials may be advertised only after PFHA approval of show is received by Regional show management.
- 4. 30 Days Prior to Show: Show packet sent to Show Secretary by PFHA Office.
- 5. Week Prior to Show: Enter and check all Pre-Entry forms. Exhibitor membership's forms can be checked on the PFHA Web Site.
- 6. Day of the Show: Make sure all entries meet all requirements (i.e. Amateur Owner Status, Sales Contracts, Gelding's Registration Papers say "Gelding," all owners and exhibitors are current PFHA members). Do not hand out back numbers until this information is complete. Do class sheets, Judge(s) cards and give out Steward's report for prior to show start.
- 7. Day After the Show: Mail to PFHA all new and renewal memberships and fees as per PFHA rules. This is strictly enforced!
- 8. 15 Days After the Show: All fees and results must be sent to the PFHA Office 15 days after the conclusion of the show.

Reminder: Completed show results MUST be postmarked no later than 15 days after the completion of the show.

Instructions for Processing this Form:

This form should be submitted either the Show Approval - Initial Application has been submitted and approved or in place of the Initial Application if licensed officials and class schedule has been finalized for a show to be approved.

1. Fill out this form in its entirety, enclose the appropriate fees and return this form along with a copy of the show's class schedule to the Association for processing. It can be returned by mail, fax or email.

2. After this form is processed, a copy of the form will be sent to the Regional President (if applicable), Show Contact and

Show Secretary with the approval or non-approval noted and the PFHA show numbers listed next to the judges

3. If approved, a show package will be sent to the Show Secretary approximately thirty 30 days prior to the start date of show, if requested below.

Method of Payment:			
Check/Money Order Payable to PFHA OR	Credit Card		*If you desire a show box, a \$30 shipping fee will be
Amount Paid \$			applied.
Check Number: Card Number: Card Holder's Name:	•		Would you like a show box?
Card Holder's Address: Country: _	Zip:		Yes
Card Holder's Phone Number:E-	mail Address:		No
Card Holder's Signature:		A 3% convenience fee on a	all credit card transactions will be applied.