



GEORGIA HUNTER JUMPER ASSOCIATION, INC.

202 S. Main Street, Suite 200 ▪ Alpharetta, Georgia 30009

Fax 770-818-5565

execsec@ghja.org

www.ghja.org

APPLICATION FOR HORSE SHOW SANCTION

NAME OF SHOW: _____

LOCATION: _____

TYPE OF SHOW (circle one):

<p>USEF fees: First show day = \$50.00 Additional days = \$25.00 each</p>	<p>USEF Local Member Show \$50.00 per show</p>	<p>GHJA Local Show fees: \$50.00 per show Or \$100.00 per show that offers Classic classes with double GHJA points</p>
--	--	---

DATES REQUESTED:

* * * * *

SHOW MANAGER: _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

I hereby agree to operate show(s) applied for above in accordance with the rules and regulations of the Georgia Hunter Jumper Association, Inc.

X _____
Signature Date

PRINTED NAME: _____

GHJA MEMBERSHIP # _____

Please print all information legibly.

INDIVIDUAL OR ORGANIZATION FINANCIALLY RESPONSIBLE FOR HORSE SHOW

NAME: _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

I hereby agree to operate show(s) applied for above in accordance with the rules and regulations of the Georgia Hunter Jumper Association, Inc.

X _____
Signature Date

PRINTED NAME: _____

SHOW CONTACT WHO WILL RECEIVE ALL SHOW MAIL & CORRESPONDENCES

NAME: _____

ADDRESS: _____

PHONE: _____ E-MAIL: _____

I hereby agree to operate show(s) applied for above in accordance with the rules and regulations of the Georgia Hunter Jumper Association, Inc.

X _____
Signature Date

PRINTED NAME: _____

OFFICIAL USE ONLY:

APPLICATION POSTMARK DATE: _____

CHECK NUMBER & BANK: _____

AMOUNT OF PAYMENT: \$ _____

DATE REVIEWED BY SHOW STANDARDS COMM: _____

DATE MEMBER DUES PAID: _____