

The National Horse Show Association of America, Ltd.

CLASS APPLICATION FORM

NHSAA / ASPCA MACLAY HORSEMANSHIP CLASS

HAMEL FOUNDATION NHS 3'3" MEDAL

TAYLOR HARRIS INSURANCE SERVICES NHS ADULT MEDAL

We hereby apply for permission to hold the following classes to be run in accordance with the rules and regulations governing them:

Check classes for which you are applying:

NHSAA/ASPCA Maclay Horsemanship (\$10 per rider for digital results / \$12 per rider if hard copy results)

Hamel Foundation NHS 3'3" Medal (\$10 per rider for digital results / \$12 per rider if hard copy results)

THIS NHS Adult Medal (\$10 per rider for digital results / \$12 per rider if hard copy results)

Name of show: _____

USEF Comp #: _____

Location: _____

Date of Show*: _____

* Please attach a list of shows & dates if holding multiple shows

We understand that the NHSAA reserves the right to withhold this permission. If such action is taken we will not hold the NHSAA liable.

Officer: _____ Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Cell: _____ Fax: _____

Show Secretary: _____ Email: _____

I Certify:

1. The competition is recognized by the USEF and/or Equine Canada;
2. Complete results will be uploaded or emailed (.dat or .csv file) with payment of \$10 per rider within 10 days of the completion of the show. If mailing hard copy results or emailing pdf, payment will be \$12 per rider within 10 days of the completion of the show (results not **received** within 20 days will be considered cancelled).

Officer Signature: _____ Date: _____

NOTE: As of September 1, 2016: To fill a class **three (3)** competitors must complete the course.

All applications must be received at least 30 days prior to the starting date of the show.

If permission is granted, the Applicant agrees to provide The National Horse Show Association of America, Ltd. with a certificate of insurance naming the NHSAA, it's officers', directors, agents, servants and employees as an additional insured with a limit of liability coverage no less than one million dollars with said certificate being provided no less than 15 days prior to the commencement of the horse show.

Please return to:

National Horse Show, 2245 Stone Garden Lane, Lexington, KY 40513

Cell: 859-608-3709 Fax: 866-285-9496 email: cindy@nhs.org