AHA Results Coversheet

Please complete the applicable sections of this form and return along with a check or Visa/MC/Amex number covering fees collected.
All fees and delivery must be sent no later than 15 days after the close of the show.

****Please use two forms for concurrent shows.****

Show number _____ Show Name _____

Show dates _____ Location _____

Show Manager _____ Show Secretary _____

Address _____ Address _____

Email _____ Email _____

Phone _____ Phone _____

REQUIRED INFORMATION & FEES

Single Event Membership Fee (AHA Affiliate clubs)	_____	x	$17.50	=	$ 0.00
Single Event Membership Fee (Non-AHA Affiliate clubs)	_____	x	$35.00	=	$ 0.00
$50 Results processing fee for non-electronic results	_____	x	$50.00	=	$ 0.00
AHA Results reporting fee (number of horses entered in show)	_____	x	$ 4.00	=	$ 0.00
AHA Judges & Stewards Education Fee 9/90 - Regular Show	_____	x	$ 4.00	=	$ 0.00
AHA Judges & Stewards Education Fee 9/90 - Concurrent Show this fee is paid once for both shows	_____	x	$ 7.00	=	$ 0.00
AHA Judges & Stewards Education Fee 9/90 - Regional Show	_____	x	$15.00	=	$ 0.00
Number of classes added to the show	_____	x	$30.00	=	$ 0.00
Number of AHA Adult with Competition memberships	_____	x	$125.00	=	$ 0.00
Number of AHA Youth with Competition memberships	_____	x	$45.00	=	$ 0.00
Number of AHA Business memberships	_____	x	$100.00	=	$ 0.00
Total				=	**$ 0.00**

PAYMENT INFORMATION (do not detach)
ENTER AMOUNT FROM ABOVE

TOTAL AMOUNT ENCLOSED _____

PAYMENT METHOD (PLEASE DO NOT SEND CASH) MAKE CHECK PAYABLE TO AHA

CHECK # _____ We also accept Visa AMEX MasterCard Discover

Card Number _____ Exp Date ____/CVV____

Card Holder's Name (Print) _____ Billing Zip code _____

Card Holder's Signature _____

CLASSES ADDED TO SHOW		
Class Number	**Class Code**	**Class Title**

SPLIT CLASSES		
Class Number	**Class Code**	**Class Title**

TBA CLASSES WITH ENTRIES

Class Number	Class Code	Class Title

CANCELLED CLASSES

Class Number	Class Code	Class Title