



Membership # _____

**HOWARD COUNTY HORSE SHOWS ASSOCIATION
2010 Annual Registration Form**

Every person who participates in a Howard County Horse Shows Association show is responsible for a knowledge of, and is subject to the Association rules. Exhibitors will better enjoy the show by knowing them. Members will receive a copy of the current "Rules and Regulations" and are entitled to participate in the Annual Meeting and Year End Awards. All riders and Horses/Ponies must be registered with the Association annually for points to count in all Divisions, including all Equitation Classes and HCHSA Medal Classes. No points will accumulate toward any High Score Award before the horse or pony is registered with the Association, the rider is a member and all fees are paid. No points will be retroactive.

MEMBERSHIP REGISTRATION

\$25 Junior _____

(17 yrs. Old and under as of
12/01 previous year)

\$30 Senior _____

(18 yrs or older)

TRAINER: _____

MEMBER NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____ PHONE: () _____

CITY/STATE: _____ ZIP: _____ Email: _____

If Junior Member provide Parent name and Email: _____

****Deduct \$10 if postmarked before April 1, 2010****

HORSE/PONY REGISTRATION

\$15 FEE FOR EACH HORSE/PONY

**NAME OF HORSE OR PONY ENTERED AT SHOWS
MUST APPEAR EXACTLY AS REGISTERED BELOW**

******* THERE IS A \$10 FEE FOR NAME CHANGE DURING THE SHOW SEASON*******

SHOW NAME OF HORSE OR PONY	AGE	BREED	SEX	COLOR	HEIGHT	HCHSA ONLY

Total Horse/Pony fees _____ (\$15 each)

BEFORE ENTERING A CLASS, PONIES MUST HAVE A CURRENT MEASUREMENT CARD ON FILE WITH HCHSA FROM A RECOGNIZED ASSOCIATION (HCHSA, MHSA, AHSA) TO BE ELIGIBLE FOR POINTS

I HEREBY AGREE TO ABIDE BY THE RULES AND REGULATIONS OF THE HCHSA:

SIGNATURE: _____ DATE: _____

Parent or Guardian if under 18 years old

Initial here if you would like to have a hard copy of the rulebook mailed to you. Otherwise, you will have access to your member information and rulebook at HCHSA.net _____

RETURN APPLICATION AND REMITTANCE TO:

**Howard County Horse Shows Association
c/o Dawn Vileno
3360 Gold Mine Road
Brookeville, MD 20833
(202) 340-6870 DVileno2@aol.com**

HCHSA USE ONLY

Payment Received: _____ Cash/check No: _____

Labels _____ Member List _____ Rule Book _____ Mem Card _____