



CALIFORNIA STATE HORSEMEN'S ASSOCIATION, INCORPORATED

English Western Program Request for Show Sanctioning

Mail completed form with \$25 fee to: CSHA English Western Program, 1512 Plymouth Ln, Antioch, CA 94509

Call (925) 754-4141 or Email: cshaenglishwestern@gmail.com for information

Please Print

Name of Show: _____

Location Address: _____ City: _____ St: _____ Zip: _____

Show Sponsor: _____

Mailing Address: _____ City: _____ St: _____ Zip: _____

Show Manager: _____ Phone Number: _____

Website: _____ Email Address: _____

CATEGORIES REQUESTED (circle)

Halter Showmanship English/Flat English/Fences Western Trail Reining Ranch Horse

Show Date Alternate Date Judge's Name License Issued By Single/Double Points

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(Use other side for additional dates)

- Copy of Show Premium is attached or
- Electronic copy of Show Premium has been emailed to cshaenglishwestern@gmail.com

Total Fee Due: \$25.00
(MAKE CHECK PAYABLE TO CSHA E/W Program)

We hereby submit our application for show approval(s) and agree to abide by all CSHA rules regarding the CSHA English Western program. We further agree to hold harmless the California State Horsemen's Association (CSHA) from any claims of liability by any CSHA member(s) who may be participating in our show(s).

Signature of Club President or Show Manager: _____

Printed Name of Above: _____ Date: _____

Please submit your class list for each show being requested for approval along with this application. We are not responsible for any delays in approval caused by an incomplete application, to include missing information, non-payment of fee or failure to submit a class list.

Office Use Only

Approval by: _____ Date: _____

Date Received: _____ Check #: _____ Amount: \$ _____ G/L Account: _____