



# Maryland Horse Shows Association, Inc.

PO Box 127 • Hampstead, MD 21074

Phone • 410-591-0380 • secretary@mdhsa.org

## 2019 Show Date Application

Please legibly complete information requested on both sides of this form.

**Return with applicable fee 60 days prior to show date** (*fee must accompany application*).

Name of Competition: \_\_\_\_\_

Location of Competition: \_\_\_\_\_

Date Requested: \_\_\_\_\_ USEF #: \_\_\_\_\_

Website Address: \_\_\_\_\_ USEF Rating: \_\_\_\_\_

Prize List Enclosed : Yes : \_\_\_\_\_ No: \_\_\_\_\_

**Manager** is required to be current MHSA Senior/Lifetime Member in good standing  
(complete attached membership form)

Manager: \_\_\_\_\_ MHSA #: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contact information will be published at [www.mdhsa.org](http://www.mdhsa.org) and sent out digitally

Contact: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Label file will be sent approximately 2 months before show date unless requested otherwise.

Excel File by Email: \_\_\_\_\_ Sent by: \_\_\_\_\_

Alpha Order: \_\_\_\_\_ Sent to: Manager \_\_\_\_\_ Contact \_\_\_\_\_

By Zip Code: \_\_\_\_\_ Address, if Other: \_\_\_\_\_

Do Not Send: \_\_\_\_\_

(continued on next page)

**Mark Requested Rating "A", "B", or "C" in Box by Division OFFERED**

List Total Amount of Prize Money offered in each Division as needed and/or bracket when divisions combined.

Please Note: There is no additional charge for holding MHSA Equitation classes but they must be indicated on this form.

Prize Money	Rating	Division	Prize Money	Rating	Division
_____	_____	Small Pony Hunter	_____	_____	Children's Pony - Small/Medium
_____	_____	Medium Pony Hunter	_____	_____	Children's Pony - Large
_____	_____	Large Pony Hunter	_____	_____	Children's Hunter - Younger
_____	_____	Small/Medium Green Pony Hunter	_____	_____	Children's Hunter - Older
_____	_____	Large Green Pony Hunter	_____	_____	Adult Amateur Hunter - 18 - 35
_____	_____	Small Junior Hunter	_____	_____	Adult Amateur Hunter - 36 - 49
_____	_____	Large Junior Hunter	_____	_____	Adult Amateur Hunter - 50+
_____	_____	3'3" Junior Hunter - Small	_____	_____	Green Hunter 3'
_____	_____	3'3" Junior Hunter - Large	_____	_____	Green Hunter 3'3"
_____	_____	3'3" A/O - Younger	_____	_____	Pre-Children's Hunter Horse
_____	_____	3'3" A/O - Older	_____	_____	Pre-Children's Hunter Pony
_____	_____	Amateur Owner Hunter	_____	_____	Pre-Adult Hunter
_____	_____	Green Hunter, 3'6", 3'9"			
_____	_____	Green Conformation Hunter			
			<b>Jumpers</b>		
_____	_____	High Performance Working Hunter	_____	_____	Children's Jumper
_____	_____	3'3" Performance Hunter	_____	_____	Adult Amateur Jumper
_____	_____	Thoroughbred Hunter	_____	_____	Low Child/Adult Jumper
			_____	_____	Combined Jumper
			_____	_____	Junior Jumper
			_____	_____	Amateur Owner Jumper
			<b>Hunter Breeding</b>		
			_____	_____	Best Non Thoroughbred
			_____	_____	Best Thoroughbred
			_____	_____	Best Pony
			_____	_____	Amateur Handler

**Equitation** (check if offered)

- \_\_\_\_\_ MHSA Lead Line
- \_\_\_\_\_ MHSA Short Stirrup Equitation
- \_\_\_\_\_ MHSA Children's Pony Medal
- \_\_\_\_\_ MHSA Adult Amateur Medal
- \_\_\_\_\_ MHSA Hunt Seat on Horses
- \_\_\_\_\_ MHSA Hunt Seat on Ponies
- \_\_\_\_\_ Gittings Horsemanship

**SHOW APPLICATION FEES**

Show Manager Membership Dues	\$ 50.00	Manager Dues	\$ _____
Regular Member 1 Day Show	100.00	complete attached form	
Regular Member 2 Day Show	125.00		
Regular Member 3 or More Days	150.00	Show Fees	\$ _____
Hunter Breeding 1 Day Show	50.00		
		Total Due	\$ _____

Proof of insurance for each show date naming the MHSA as additional insured must be provided to the MHSA prior to the show date. Please include with show application or send a copy to the MHSA office. I, the show manager, declare that we currently have an insurance policy naming the MHSA as additional insured for the above listed horse show date(s). (Minimum \$1 million occurrence,/\$2 million aggregate). Show will not be recognized without show manager signature and policy number.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Show Manager/Show Chairman (show will not be recognized without signature)

Policy #: \_\_\_\_\_

The undersigned agree to abide by the By-Laws, Rules and Regulations of MHSA, Inc. and affirm that application has been made at least 60 days prior to the date of the show and that all applicable fees accompany this application. It will be understood that under no circumstances will the show be approved unless all fees have been paid. In addition, no application will be accepted for a show until all bills to the Association for previous shows have been paid.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Show Manager/Show Chairman



Maryland Horse Shows Association, Inc.  
PO Box 127 • Hampstead, MD 21074  
Phone: 410-591-0380

**SHOW MANAGER APPLICATION FOR MEMBERSHIP**

Name: \_\_\_\_\_ Life Dues ..... \$450.00

Street Address: \_\_\_\_\_ Senior Dues ..... \$50.00

City/State/Zip: \_\_\_\_\_

MHSA Membership Number: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I hereby apply for Membership for the year 20\_\_\_\_ and enclose payment of \$\_\_\_\_\_  
(Membership expires November 30). To be eligible to vote at the Annual Meeting, dues must be paid in  
accordance with Rule II, Part I, Section 5.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Returned checks will be assessed a \$45.00 fee

Decmeber 2018

The \_\_\_\_\_ Horse Show  
is operated in accordance with the rules of

**THE MARYLAND HORSE SHOWS ASSOCIATION, INC.**

“B” Rated in the following divisions:

- Adult Amateur Hunter •• Children’s Hunter Horse
- Junior Hunter •• 3’3” and 3’6” Amateur Owner
- Children’s Hunter Pony •• Thoroughbred Hunter
- Green Pony Hunter •• Regular Pony Hunter
- Pre-Green Hunter •• Pre-Adult Hunter
- Pre-Children’s Horse and Pony
- Short Stirrup Equitation •• Lead Line

Maryland Horse Shows Association, Inc.  
PO Box 127  
Hampstead, MD 21074  
Phone: (410) 591-0380  
www.mdhsa.org

I hereby apply for Membership for the year 20\_\_\_\_\_ and enclose  
payment of \$\_\_\_\_\_ (membership expires November 30). To  
be eligible to vote at the Annual Meeting, dues must be paid in accordance  
with Rule II, Part I, Sec. 5.

New Member \_\_\_\_\_ Renewing Member \_\_\_\_\_

Name _____	Life Dues ..... \$450.00
Address _____	Senior Dues ..... \$50.00
City/State/Zip _____	Senior Amateur ..... \$50.00
Telephone _____	Junior Dues ..... \$40.00
Email Address _____	Farm Dues ..... \$60.00
Date of Birth _____	

Note: To qualify for High Score Awards, an animal must be registered with the  
Association and the Owner must be a member of the Association. Contact the  
MHSA for a Horse/Pony recording form or go online at [www.mdhsa.org](http://www.mdhsa.org)

Name of Show

Regular/Local/Hunter Breeding  
A / B / C

List divisions recognized

Sample Association Page

may be copied and corrections  
made as indicated above.