APPLICATION TO HOST

THE GOOD HANDS QUALIFYING CLASS

PLEASE PRINT (Use separate forms when applying for more than one show.)

The_____Horse Show
Requests permission to hold a qualifying class for The Good Hands Finals.

_____This is a USEF recognized show (USEF affiliation not required)

Show Date_____

Class will be held on_____ (day and date, if known)

Address and location of show:

_____

_____

Show contact (class trophy will be sent to this address):

Name_____

Address_____

City/Sat/Zip_____

Phone_____Email_____

Enclosed is a check for $35.00 payable to: MAHSA

_____
Signature of person applying Date

Send check to: The Good Hands
1101 Peace Dr
Wheeling IL 60090-5577

For further information: Phone: 847-537-4743 Fax: 847-537-4758
Email: admin@midamericahorseshow.orf