



PACIFIC COAST HORSE SHOWS ASSOCIATION PO Box
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SHOW DATE APPLICATION

NAME OF COMPETITION:

LOCATION:

(FACILITY)

(CITY)

(STATE)

COMPETITION DATE DESIRED:

COMPETITION PRODUCER:

(ENTITY, PERSON OR PERSONS FINANCIALLY RESPONSIBLE FOR SHOW. i.e. WILL RETAIN OR DISBURSE ANY PROFITS AND WILL BEAR ANY LOSSES)

ADDRESS:

TELEPHONE:

EMAIL:

COMPETITION MANAGER:

PCHA#:

ADDRESS:

TELEPHONE:

EMAIL:

SHOW CONTACT:

PCHA#:

(This is who PCHA will contact regarding results and payment, as well as where the show packet will be sent to)

ADDRESS:

TELEPHONE:

EMAIL:

COMPETITION WEBSITE:

WESTERN APPROVAL FEES

Please choose one:

**Event with Exemption: JLB classes only

Reining Only

Number of JLB Classes:

PCHA SPECIAL CLASS FEE (may be payed after show)

PCHA Jack and Linda Baker Reining- \$30

A check for the **APPROVAL FEES MUST ACCOMPANY THIS APPLICATION**. Other required fees may be paid at a later date. Make Checks payable to PCHA. In applying for the date noted hereon, this Competition, its Producers, Manager and Agents agree to abide by all the rules of PCHA and understand that failure to do so constitutes a violation of the rules, which may subject the Competition, its Management, Manager and Agents to penalty under the provisions as stated in the PCHA Rule Book. The competition, its Management, Manger, and Agents will accept as final the decision of the PCHA as to any dispute regarding show dates and will accept as final the decision of the PCHA Hearing Committee on any other question arising under the PCHA rules. The competition and its management agree to defend, indemnify and hold harmless the PCHA, its Directors, Officers, Committee Members, Agents and Employees from and against all loss or damage including any and all claims arising out of the Competition, including claims as to personal injury or property loss or damage suffered during or in connection with the Competition whether or not such injury or loss resulted directly or indirectly from negligent acts or omissions of sad Directors, Officers, Committee Members, Agents or Employees.

Signature

Title