PATTERNED SPEED HORSE ASSOCIATION
Show Approval Application

SEND COMPLETED FOR TO:

Mail Emma Murphy
1193 Fowles Ln Bellingham,
WA 98226

Email: psha.vicepresident@gmail.com

Qualifying Season: _____

Approval Fee per day: $10.00 # of Days: _____

Total: $ _____ Check #: _____

SEND CHECK AND COPY OF FORM TO:

Shannon Fadden
C/O PSHA
4800 Malaga-Alcoa Hwy
Malaga, WA 98828

Show Sponsor (Club): _____

Date #1: _____ Start Time: _____

Date #2: _____ Start Time: _____

Date #3: _____ Start Time: _____

Show Location: _____

Street Address: _____

City, State, Zip: _____

In Case of Rain: Reschedule: ☐ Cancel: ☐

Optional Arenas: _____

_____

Show Chairperson: _____

Phone Number: _____

Email Address: _____

Per Ride Entry Fees

Open Entry Fee per ride: $ _____

Buckaroo Fee per ride: $ _____

Per Day Entry Fees

Pre Entry Open: $ _____

Late Entry Open: $ _____

Pre Entry Buckaroo: $ _____

Late Entry Buckaroo: $ _____

Jackpot Fees

Open Jackpot Fee: $ _____

Jackpot Payback: % or $ _____

Teams Jackpot Fee: $ _____

Jackpot Payback: % or $ _____

CLASS INFORMATION **QYT**

Open Classes Max 4: _____

Buckaroo Classes Max 4: _____

Teams Classes Max 2: _____

Open Jackpot Max 1: _____

Teams Jackpot Max 1: _____

Additional/Optional Fees

Arena Fee: $ _____

Stalls per day: $ _____

Camping per night: $ _____

Open Awards: $ _____

Buckaroo Awards: $ _____

Other Format (Jr, Sr, 4D, ect) : _____

Additional Information : _____

List below by letter designation, the order in which events will be run. Designate unapproved events to be ran in the proper sequence with State Approved events by using the "appropiate events" designators.

PSHA APPROVED EVENTS:

P) Polebending
B) Texas Barrels
K) Keyhole
8) Figure 8
F) Individual Flags
CS) California Stake
KR) Keyrace

3B) 2 Man 3 Barrel
CH) Cowhide
TP) Team Poles
TB) Team Baton

2S) 2 Man Stake
RR) Rescue Race
TF) Team Flags
RL) Bareback Relay

**** For NON PSHA EVENTS:**

#) Other "List name of the event"

Event Order

1)	2)	3)
4)	5)	6)
7)	8)	9)
10)	11)	12)
13)	14)	15)
16)		
17)		

Show Chairperson must sign this application before PSHA will accept it. This form must be filled out in its entirety and sent along with the approved fees.

Show Chairperson: _____ Date: _____