

American Stock Horse Association
Clinic and Competition Report & Financial Report
 (one report is due for each competition, if double judged)

CLINIC Report: Date of ASHA Clinic _____ Name of Sponsoring Group _____

Name(s) of Clinicians _____

All PARTICIPANTS must be current members of the ASHA Association. Participants may pay membership fees when they register and participate. Memberships are good for one year Jan 1. to Dec 31.

ASHA Clinic Registration Fees -A \$5 per participant fee goes to the ASHA Association.

ASHA Clinic Report and Income		Fees Due ASHA
ASHA Clinic Fees - Total Number of Participants _____	X \$5	
TOTAL Fees Collected at Clinic Payable to ASHA and enclosed with this		

COMPETITION Report: Date of ASHA Competition _____ Name of Sponsoring Group _____

Name of Judge(s) _____

* All participants must be members of ASHA. ASHA receives a \$5 per rider/horse combination entry

* All horses shown in ASHA Competitions must possess an ASHA Horse Competition License.

ASHA Competition Report and Income		Fees Due ASHA
ASHA Competition Fees & Documentation . A \$5 fee for each horse/rider combination entry is due to ASHA. It is recommended that ASHA Competitions charge a bookkeeping fee for each horse/rider combination. Five dollars of that bookkeeping fee can be designated for the ASHA fee. The rest of the bookkeeping fee can be used by show management to pay for Secretarial & management expenses. No. of horse/rider combination entries _____ X \$5 Use of ASHA Provided Show Program \$25		
TOTAL Fees Collected at Competition Payable to ASHA and enclosed with this report		

***Competition Documents Attached to this Report:** Official Judges Sheets, One copy of Official Division Result Sheets including Division Summary Sheet, one copy of all Entries

***Competition Documentation sent by E-Mail:** One complete set of competition results including all division summary sheets. In one of the two ASHA Approved, EXCEL based programs. Send to stockhorse@windstream.net

ASHA Memberships & Horse Competition Licenses Purchased at ASHA Event		
(checks made directly to ASHA)		
ASHA Memberships ASHA Membership Fees (Collected at event to be paid to ASHA (Attach new/renewal Membership form with payment attached to form for each person paid) No. of ASHA Collegiate Memberships Collected X \$15 No. of ASHA Memberships Collected X \$ 25		
ASHA Horse Competition Licenses - ASHA Horse Competition Licenses (Collected at show to be paid to ASHA . (Attach Horse Competition License Application with papers for registered horses and coggins for unregistered horses for each paid application. Registered owner of record must be a member to receive license.) No. of ASHA Horse License Applications collected X \$15		

Attach all ASHA Membership Applications and ASHA Horse Competition License Applications to this Report

Total Fees Due to ASHA and enclosed with this report

Show Secretary Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-Mail _____ Signature Show Secretary _____

Please complete this form and mail with required documentation and fees, within 15 days of the show, to: ASHA, P.O. Box 3038, Glen Rose, TX 76043