



Please make checks payable to VHJA and remit to:
Colleen Mackin, 202 Sunset Circle, Georgia, Vermont 05468

Show Report Form

Must be submitted with payment in full within 14 Days of Show

SHOW NAME: _____

SHOW DATES: _____

SHOW SECRETARY: _____

ADDRESS: _____ ZIP: _____

EMAIL: _____

SHOW MANAGER: _____

ADDRESS: _____ ZIP: _____

EMAIL: _____

FEES FOR HOLDING MEDAL CLASSES TO BE PAID WITHIN 14 DAYS OF THE SHOW:

VHJA Children's 2' Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Short Stirrup Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Long Stirrup Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Hopeful Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Pony Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Novice Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Modified Adult Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Junior Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA John Corley Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA Adult Medal	# of Riders _____ X	\$2.00/Rider=_____
VHJA President's Medal	# of Riders _____ X	\$2.00/Rider=_____
Non-Member Showcase or Beginner Final Rider Fees	# of Riders _____ X	\$10.00/Rider=_____
Non-Member Riders in Medals	# of Riders _____ X	\$30.00/Rider=_____
		Total Due=_____

PLEASE ATTACH A COMPLETE CLASS LIST AND ALL RESULTS FOR EACH CLASS INCLUDING THE NUMBER OF COMPETITORS IN EACH CLASS. ALSO INCLUDE NUMERIC SCORES FOR EACH RIDER FOR ALL VHJA MEDAL CLASSES. Thank you for affiliating with VHJA