



National
Walking Horse
Association

Show Affiliation Application & Agreement
859-252-NWHA (6942)
Email: office@nwha.com

Name of Show _____

Name and Address of Show Facility _____

Show Date(s) _____ Starting Time(s) _____

Show Web Site: _____

Sponsoring Organization _____

Show Manager/Chair _____

Address _____ City _____ State _____ Zip _____

Show Manager/Chair E-mail: _____

Phone Number (Home) (_____) (Work) (_____) (Cell) (_____)

Show Secretary _____

Address _____ City _____ State _____ Zip _____

Show Secretary E-mail: _____

Phone Number (Home) (_____) (Work) (_____) (Cell) (_____)

If your show is a charity benefit, name the charity _____

If your show offers prize money, please list total amount _____

Judge _____ Judge _____ Judge _____

Judge's Full Address (Listed on NWHA Website): _____

Please send the official "show manager's packet" to: _____ Show Manager listed above Show Secretary listed above

Please list the official show contact on the NWHA web site _____ Show Manager listed above Show Secretary listed above
as:

By signing below, show management agrees to the following:

- Abide by the current rules of the National Walking Horse Association (NWHA) & the Horse Protection Act (HPA) to honor all disciplinary actions taken by the NWHA & the United States Department of Agriculture (USDA).
- Employ NWHA licensed Judge(s) or approved guest judge and pay contracted fees and travel as negotiated between show management and judge(s).
- Pay the NWHA contracted Designated Qualified Person(s) (DQP)s the amount contracted. Provide an adequate space for the DQP(s) to inspect horses and provide assistance as needed with tack removal and scribe services. DQPs will inspect ALL non-trotting breeds.
- Follow and abide by the NWHA rules specifically contained in Section 2 of the NWHA rule book regarding show management and officials and pay the required show affiliation and horse inspection DQP fees as stated in this application.
- Show must ensure that all exhibitors present a valid membership card or purchase one at the time of entry in accordance with Rule 3.8.
- Complete and mail all required NWHA documents: Class Sheets, Post show manager's report and DQP horse inspection fees to NWHA at the above address **within two weeks following the last day of affiliated show**. Show management further agrees to insure that the class entry sheets are complete & legible, including name of horse, owner, owner's address, rider, trainer and final placement of entries.

_____ We are applying to affiliate with NWHA the show named above. The \$35.00 affiliation fee is enclosed or has been paid online via the NWHA Shop. DQP fees of **\$4.00 per horse, per day by the number of horses checked will be sent with the post show manager's reports.**

_____ We are applying to affiliate with NWHA the show named above as a: (select one)

- First year show
- 4-H Club Show
- NWHA Regional Championship

The \$35.00 affiliation fee is enclosed or has been submitted via the NWHA Shop. DQP fees of **\$2.00 per horse, per day by the number of horses checked will be sent with the post show manager's reports.**

Signature _____ Title _____ Date _____