

ASPC/AMHR/ASPR Show Application

81-B E. Queenwood Morton, IL 61550

(309)263-4044 Fax (309)263-5113

ACCOUNT # _____

Please complete as it should appear in The Journal

Show Date(s) _____

Show Name _____

City/State _____

Manager Name _____ Member # _____

Manager Address _____

Manager Email _____

Phone Number _____

Steward Name _____ Member # _____

Phone Number _____

Mailing Address _____

Stick # _____

Ratings you are applying for: H= Halter P= Performance

	H	P
AMHR A	___	___
AMHR B	___	___
Classic	___	___
Modern	___	___
Mod Pleasure	___	___
ASPR	___	___

Mandatory
Please mark which
Ratings you want at
your show.
A or B or C Ratings

Official Use Only

Date Received: _____

Check # _____

Amount Received \$ _____

Rating	H	P
AMHR A	___	___
AMHR B	___	___
Classic	___	___
Modern	___	___
Mod Pleas	___	___
ASPR	___	___

Official Use Only

Date Approved _____

Approved By _____

\$100 Deposit Required

Refundable after completion of show entry. All required documents must be received (Master List, Show Results sheets, Evaluations, Judges Cards, Steward Report) and entry of all submitted results must be completed. Any missing items or questions in regards to show results will delay refund of the application fee and may result in additional penalties.

ASPC/AMHR Carded Judge Fee

\$50.00 Per Judge



**ASPC/AMHR CARDED
JUDGE FEE \$50.00
PER JUDGE**

**Circle the
Divisions each
Judge
Is judging at
your show.**

**A Show may only have one (1)
current year National Judge
and one (1) current year
Congress Judge.**

#1 ASPC/AMHR Judge Number _____

Judge Name _____

City/State _____

AMHR A AMHR B Classic Modern Modern Pleasure ASPR

#2 ASPC/AMHR Judge Number _____

Judge Name _____

City/State _____

AMHR A AMHR B Classic Modern Modern Pleasure ASPR

#3 ASPC/AMHR Judge Number _____

Judge Name _____

City/State _____

AMHR A AMHR B Classic Modern Modern Pleasure ASPR

#4 ASPC/AMHR Judge Number _____

Judge Name _____

City/State _____

AMHR A AMHR B Classic Modern Modern Pleasure ASPR

APPLICATIONS WITHOUT FEES OR SIGNATURE WILL NOT BE PROCESSED.

I, the undersigned, will ensure that the aforementioned event will be held in accordance with Sanctioned Show Rules and Regulations as outlined by the ASPC/AMHR/ASPR and that all Officials and Show Management named herein are correct. Should the submitted information change in any way, I will notify the ASPC/AMHR/ASPR National Office in writing as soon as possible. I also understand that the ASPC/AMHR/ASPR reserves the right to withdraw or withhold an Event's Approval Rating if all Sanctioning Requirements are not met or followed.

Managers Signature _____ Date _____