

POAC SHOW APPROVAL APPLICATION

This form must be completed and mailed to the National office in time for it to appear in the coming events of the magazine the month prior to the show in order for the show to count for National POAC points and awards (magazine deadline is the 5th of the month two months prior to publication month). The acknowledgement copy approving the show will be sent to the person submitting application by return mail. Only one show date may be sent per form. You must include the appropriate Show Approval Fee and a show bill. Current State/Chapter Officers must be received by the National Office each year before show approval form may be approved. You may use one form for all shows held on the same date as long as you provide all show type and judge information below. Clubs may hold a maximum of three shows over a weekend and four shows over a holiday weekend in any combination. Multiple shows may be held on the same day as long as you do not exceed the limit for your weekend.

****PLEASE NOTE****

ONCE THIS FORM HAS BEEN APPROVED, THE NATIONAL OFFICE MUST BE NOTIFIED OF ANY CHANGES MADE TO THE ORIGINAL FORM, IF NOT NOTIFIED, A \$250 FINE WILL BE IMPOSED.

SHOW DATE: _____ STATE CHAPTER: _____

LOCATION (Complete Physical Address): _____

JUDGES NAME	SHOW TYPE	CARDED	GUEST
1. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
2. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
3. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
4. _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

CLASSIFICATION OF SHOW:

- _____ A (\$40)
- _____ FAIR (POA classes sponsored by other than POA Clubs) (\$40)
- _____ PONY RAMA (Each state club is allowed six per year) (\$80)
- _____ BUILDING & PROMOTION (\$40)
- _____ REGIONAL (\$50)
- _____ INTER-BREED COMPETITION/HALTER (\$40)
- _____ PROMOTIONAL SHOW (Each state is allowed one per year) (\$300)

Each state may hold no more than ten total B&P and IBC shows per year. Regional Clubs are limited to two B&P shows per year

OTHER INFORMATION FOR PRINTING: _____

WILL THERE BE DRUG TESTING AT THIS SHOW: YES No

SHOW CHAIRMAN'S COMPLETE NAME, ADDRESS AND PHONE NUMBER
This person will be listed in the coming events section of the magazine

COMPLETE NAME, ADDRESS AND PHONE NUMBER OF PERSON TO SEND SHOW PACKET

Date of Application

Signature of person making application

MUST ENCLOSE APPROPRIATE MONETARY AMOUNT FOR EACH SHOW

DO NOT WRITE BELOW THIS LINE

DATE SHOW APPROVED: _____ SIGNED _____

POAC, INC. HOME OFFICE

POSTPONED DATE: _____ LOCATION: _____

REASON FOR POSTPONING: _____