

## EQUINE ORGANIZATION SHOW APPROVAL FORM

This form must be completed and mailed or emailed to the POAC National office within 30 days of the show date to count for National POAC points and awards. The acknowledgement copy approving the show will be sent to the person submitting application by return mail or email. Only one show date may be sent per form. You must include the appropriate Equine Organization Show Approval Fee and a show bill listing all POAC classes to be held. You may use one form for all shows held on the same date.

**\*\*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: \_\_\_\_\_

EQUINE ORGANIZATION NAME: \_\_\_\_\_

LOCATION OF SHOW (Complete Physical Address):  
\_\_\_\_\_  
\_\_\_\_\_

EQUINE ORGANIZATION SHOW FEE: \$15/show/judge

Number of judges: \_\_\_\_\_ x \$15 = \_\_\_\_\_

OTHER INFORMATION FOR PRINTING: \_\_\_\_\_  
**SHOW CHAIR'S COMPLETE NAME, E-MAIL ADDRESS, MAILING ADDRESS, AND PHONE NUMBER:**  
Show Chair information will be listed in the coming events section to answer questions or accept entries

Date of Application: \_\_\_\_\_ Signature of person sending application: \_\_\_\_\_

**MUST ENCLOSE APPROPRIATE MONETARY AMOUNT FOR EACH SHOW/JUDGE. MUST SEND IN A COPY OF THE SHOWBILL WITH POAC CLASSES TO BE OFFERED DESIGNATED ON THE SHOWBILL. OTHERWISE, THE SHOW APPROVAL FORM WILL BE REJECTED.**

DO NOT WRITE BELOW THIS LINE

DATE SHOW APPROVED: \_\_\_\_\_ SIGNED \_\_\_\_\_

POSTPONED DATE: \_\_\_\_\_ LOCATION: \_\_\_\_\_ POAC, INC. HOME OFFICE

REASON FOR POSTPONING: \_\_\_\_\_

**PONY OF THE AMERICAS CLUB, 3828 S. Emerson Ave. Indianapolis, Indiana 46203, 317-788-0107  
www.poac.org Fax: 317-788-8974**

# POAC Equine Organization Results Form

THIS REPORT MUST COVER ONE PONY / ONE RIDER ONLY.  
FOR SHOWS THAT HAVE MULTIPLE JUDGES, USE 1 FORM PER JUDGE.

Pony Name: \_\_\_\_\_

Year Foaled: \_\_\_\_\_ Reg#: \_\_\_\_\_ Sex: S G M Height \_\_\_\_\_ PHC \_\_\_\_\_

Owner Name: \_\_\_\_\_

Owner City/State: \_\_\_\_\_ Membership # \_\_\_\_\_

Rider Name: \_\_\_\_\_ Age (as of Jan. 1): \_\_\_\_\_

Rider City/State: \_\_\_\_\_ Membership # \_\_\_\_\_

Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ E-Mail: \_\_\_\_\_

SHOW DATE: \_\_\_\_\_

EQUINE ORGANIZATION NAME: \_\_\_\_\_

LOCATION OF SHOW (Complete Physical Address):  
\_\_\_\_\_

NAME OF JUDGE: \_\_\_\_\_

Name of Class:	# of Entries:	Placing:

I do hereby certify that the pony listed on this report did in fact enter and place in the classes as stated by this report.

Exhibitor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Show Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Show Chair Printed Name: \_\_\_\_\_

(Can be filled out and signed by the show chair, show secretary or judge.)

Forward this completed report within 30 days after the show date with the appropriate fees (see appendix in POAC rulebook) to the POAC Home Office. Form to be sent in by pony owner or exhibitor.

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