

Virginia Appaloosa Horse Club Regional Show Points Form

Horse's Name: _____ ApHC Registration No.: _____
 Owner's Name: _____
 Exhibitor's Name: _____

Show Name: _____ Show Date: _____
 Location: _____

Class Description	# of Entries	Placing of Above Horse

*use back of sheet if additional room is needed for other class entries

I hereby certify that the above named horse/rider placed in the classes listed above.

Show Secretary: _____ Date: _____ Phone: _____

A copy of the prize list or event schedule must be attached to this form in order for points to be accepted.

Mail to:
 Renee McCalla
 8303 Forest Grove Court
 Locust Grove, VA 22508

Office Use Only:	Date Postmarked:
Date Received:	
Comments:	