

ILLINOIS HUNTER & JUMPER ASSOCIATION

Return this form along with the appropriate fees (payable to the IHJA) to the IHJA office (address below)

2025 IHJA Horse Show Application

IHJA c/o Lexi Jacober -- P.O. Box 250 Gilberts, IL. 60136 -- 630-973-8106 -- www.ihja.com

□ Qu	Questions may be addressed to Lexi Jacober at (630) 973-8106 e-mail points@ihja.com			
□ Illin	inois Show Managers and Owners MUST be current IHJA members by the date of application for an IHJA show			
□ App	Approval of an IHJA show date requires that Managers and Owners must also be IHJA members during show			
<u>year</u>				
Hamas Ohans Information				
Horse Show Information Name of Horse Show:			Show Dates Requested:	
INAME OF HOISE SHOW.		Show Dates Requested.		
Exact Name of Farm or Facility where show will be held:			City, State where show will be held	
	<u></u>		only, duste <u>interestion him at note</u>	
Will this has	a USEF recognized or B show?		Did this show operate last year?	
	•	WILLA D. O' ''		
(circle or	ne) USEF AA / A / B IHJA /	WHJA B Circuit	(circle one) Yes / No	
Horse Show MANAGER – Contact Information				
Name of Horse Show Manager:			Telephone:	
Address:			Fax:	
Address.			rdx.	
			E-mail:	
Horse Show SECRETARY – Contact Information				
Name of Horse Show Secretary:			Telephone:	
Address:			Fax:	
Address.			E-mail:	
			E-mail.	
Important: Show Results formatting must be pre-approved by the Executive Secretary via e-mail at points@ihja.com				
Application and Processing Fees (please indicate the applicable fees);				
\$ 100 Application Fee for INSTATE USEF AA, USEF A, USEF B Shows, IHJA B and WHJA B circuit Shows				
\$ 100 Application Fee for OUT OF STATE USEF AA, USEF A, USEF B Shows, IHJA B and WHJA B circuit Shows				
	VISAM/C	AMEX		
Name on Credit Card Billing Zip Code				
LXP. Date Billing Zip Gode				
Credit Card Number Security Code				
Total Fees Enclosed: \$				
FOR	Date Received:	Check #:	Amount: \$	
OFFICE USE	Date Neceiveu.	Official #.	Λιτιουπί. ψ	
	Labels Sent:	Secretary F	Package Sent:	