Shire Alternative Competition Exhibitor Report

Horse's Name: _____ **Registration Number:** _____

Recorded Owner of Horse: _____ **A Membership Number:** _____

Show Name and Location (City/ State): _____

Organization Show is Approved or Sponsored by: _____

Judge's Name: _____ **Show Date:** _____

For the show or event referenced above, list below each class entered and the placing.

Class Number/ Class Name	Placing	Entries in Class

We certify that the horse named above on the report did in fact enter and place in the classes listed on this report. Our submission of this form indicated our compliance with ASHA rules of showing and conduct as well as the rules of the SAC Program. *Any fraudulent reporting will result in permanent termination from the SAC Program and all points and awards won with horse(s) in question to be stripped.*

Owner Signature: _____ **Date:** _____

As show manager/ secretary, I have seen the above horse's ASHA registration papers or a photocopy of its registration papers. I also confirm that the horse did compete and place as indicated above and I can and will provide formal results at the request of the SAC Secretary, up to one year from the date of this event.

Show Manager/ Secretary Signature: _____ **Date:** _____

Please Return All Paperwork to:

Shire Alternative Competition Program
C/O SAC Secretary; Leanne Hoagland
PO Box 95 * Glendive MT 59330
(406) 687- 3004
sacprogram@midrivers.com

Please Contact the SAC Secretary with any changes to the show as nominated. This includes:

1) Change in Secretary or management

2) Change in Dates, Location or Class List