



USHJA Zone Finals Application

Please read accompanying specifications before submitting application to hold a zone final.

Zone: _____ Inclusive Dates of Show for 2010: _____

Name of Competition: _____ Competition Rating: _____

Competition Address: _____

City: _____ State: _____ USEF Competition #: _____ Website: _____

Zone Finals Information

Divisions to be offered:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Division(s) to receive USEF Bonus Points:

Applications must be received by November 13 to be considered to hold a USHJA Zone Final. Applications received after this date will not be considered. Applications will be reviewed and approved based on geographic availability. *Applications can not be accepted over the phone.*

_____	_____	_____
Print Name	Signature	Date

Please complete the information below and mail or fax in your application to:

USHJA Zone Finals
3870 Cigar Lane, Lexington, KY 40511
Or Fax to: 859 258-9033

FOR OFFICE USE ONLY:
Date Received: _____
Date Reviewed by Officers: _____