



APPLICATION TO HOST 2008 USEF YOUTH REINING CHAMPIONSHIP QUALIFIER

UNITED STATES EQUESTRIAN FEDERATION - ONE WITH THE HORSE

Application due in the Federation office 60 days prior to competition date along with the \$50 fee.

NAME OF COMPETITION _____

DATE OF COMPETITION _____

CITY, STATE WHERE COMPETITION IS HELD _____

CONTACT PERSON _____

ADDRESS _____

CITY STATE ZIP

PHONE () FAX

E-MAIL _____

I WOULD LIKE TO:

Hold a USEF Youth Reining Championship Qualifier.

I agree to forward \$10 per entry in youth qualifying class to USEF upon completion of the event. I understand the funds received from Youth Qualifying classes will be applied to support the USEF Youth Reining Championship.

Return to: Courtney Barnett, Director of Reining
 United States Equestrian Federation
 4047 Iron Works Parkway
 Lexington, Kentucky 40511
 (859) 225-6919
 cbarnett@usef.org

USEF : 4047 IRON WORKS PARKWAY : LEXINGTON, KY 40511 : (859) 258-2472 : (859) 231-6662 FAX : www.usef.org

RG01-1207-R1

PAYMENT INFORMATION (Do not detach)

ENTER AMOUNT FROM ABOVE

TOTAL AMOUNT ENCLOSED \$.

PAYMENT METHOD (PLEASE DO NOT SEND CASH) Make checks payable to: United States Equestrian Federation

CHECK # _____ We also accept: VISA or MASTER CARD

CARD NUMBER

- - -

EXPIRATION DATE

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CARD HOLDER'S NAME (Print) _____

CARD HOLDER'S SIGNATURE _____

BILLING ZIP CODE