

MFTHBA Horse Show Buckle Series Application

Proposed name of buckle series:	
Proposed dates of Buckles Series shows/events:	Show locations (City and state):
1	
2 3	
4	
5	
6.	
Judges of proposed shows:	Current MFTHBA Judge? Y or N
1	9
3	
4	
6	
2	

In the space below, please list/describe what classes, events or divisions you are proposing as the requirements of your MFTHBA buckle series. (You may also submit as an attached document):
Name of person completing application:
Address:
Phone number:
E-Mail:

• Please submit application to the MFTHBA office at

PO Box 1027 Ava, MO 65608 Phone: 417-683-2468

Fax: 417-683-6144

Email: foxtrot@mfthba.com

• Please include application fee of \$50.00 payable to MFTHBA or by calling the office for credit card payment.