

**WHOA HIO**  
**2023 SHOW MANAGERS REPORT**

WHOA HIO'S COPY OF CLASS ENTRY SHEETS SHOWING EACH HORSE ENTERED AND ALL PLACINGS,  
SHOW MANAGERS REPORT, JUDGE SCORE CARDS, JUDGE EVALUATION AND MEMBERSHIP  
APPLICATIONS WITH PAYMENTS MUST BE MAILED *WITHIN 15 DAYS* AFTER SHOW IS HELD.

Name of Show \_\_\_\_\_ Date of Show \_\_\_\_\_  
Location of Show \_\_\_\_\_ Starting Time \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Ending Time \_\_\_\_\_  
Sponsoring Organization \_\_\_\_\_  
Approximate Number of Spectators \_\_\_\_\_ Charity Benefited & Amount Donated \_\_\_\_\_  
Name of Judge(s) \_\_\_\_\_ Name of Show Veterinarian \_\_\_\_\_  
Your Recommendations \_\_\_\_\_  
Number of Padded Walking Horse Classes \_\_\_\_\_ Number of Flat Shod Racking Classes \_\_\_\_\_  
Number of Flat Shod Walking Horse Classes \_\_\_\_\_ Total Number of Racking Horse Classes \_\_\_\_\_  
Total Number of Walking Horse Classes \_\_\_\_\_ Total Number of Racking Horse entries \_\_\_\_\_  
Total Number of Walking Horse entries \_\_\_\_\_ Total Number of other gaited breed entries \_\_\_\_\_  
Total Number of Padded Racking Classes \_\_\_\_\_  
Number of other gaited breed classes (Rocky Mtn, Spotted Saddle Horse, Fox Trotters, etc.) \_\_\_\_\_

**TOTAL NUMBER OF INSPECTED ENTRIES AT SHOW** \_\_\_\_\_

**TOTAL AFFILIATION FEES OF \$4 PER HORSE, PER DAY** \_\_\_\_\_

**TOTAL NUMBER OF MEMBERSHIP FEES (ENCLOSE APPLICATION)** \_\_\_\_\_

**TOTAL NUMBER OF TEMPORARY MEMBERSHIP FEES (ENCLOSE APPLICATION)** \_\_\_\_\_

**TOTAL OF FEES ENCLOSED** \_\_\_\_\_

\_\_\_\_\_  
Show Manager

\_\_\_\_\_  
Show Secretary

\_\_\_\_\_  
P.O. Box Street

\_\_\_\_\_  
P.O. Box Street

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Telephone Number

By \_\_\_\_\_  
(Signature)