



Horse Show Development Program Application

As an authorized agent for the sponsoring organization and/or horse show, acting for and on behalf of Show Management, I agree to enter the TWHBEA Horse Show Development Program. I fully understand this no-charge service may entitle our show to grant funding based on the criteria and funding guidelines of the Program. In exchange for this development and support aid, our show will commit to a minimum of three years in the HSD Program and will abide by the Program criteria and guidelines. I further understand that grant funding may be reduced or terminated by TWHBEA at any time.

Please print or type the following information.

Official name of horse show _____

Check Option: 1 _____ Regular Show 2 _____ Versatility Show 3 _____ Futurity Show

Show Location _____

Show Date _____

Sponsoring organization name and address _____

Show Manager Name and address _____

Show Manager: Telephone _____ Fax _____ Cell _____

Has this organization previously received funding from TWHBEA (this year or previous years)? _____

If yes, event, date and amount of funding: _____

This sponsoring organization has been the primary sponsor of _____ previously held TWH shows/events.

Were these TWH shows/events held in consecutive years? _____ If not, please explain on reverse.

This year will mark our _____ year for a TWH show/event.

Regulatory affiliation _____

As an officer or authorized agent of the above named organization, I do hereby agree that our show will follow the prescribed criteria as set forth by TWHBEA.

Signature _____

Date _____

Official Class Sheet or Horse Show Program must be attached to this application.



The Three Tier Model

The TWHBEA Horse Show Development Program (HSD) will gladly assist your show and its management in producing a quality venue by addressing and working on the three fundamental elements of a successful horse show.

Administration

- A. Assist and train your group in setting up your show committee structure.
- B. Guide show management through the ABCs of organizing the horse show.
- C. Provide technology linked to the TWHBEA to stream line the entry process and limit the amount of paper work through computer and PDA devices.
- D. Assistance at your show wherever needed.

Publicity and Marketing

- A. Press releases
- B. Trainer/owner notification cards to be mailed out
- C. Utilization of the Official Breed Journal – *Voice of the Tennessee Walking Horse*

Networking Link to the Tennessee Walking Horse Industry

- A. Counsel show management on what trainers/exhibitors/owners expect at your show.
- B. Build a working relationship between show management and industry groups.

This logo MUST be printed on ALL horse show advertising - class sheets, horse show programs, newspapers advertising, etc.

To receive this logo electronically please contact the graphic designer, Amy Spears at 931-359-0599 or aspears@twhbea.com





Name of Show: _____

Contact: _____

Location of Show: _____

Date of Show: _____

Phone: _____

Option #1 - Criteria for a Regular Horse Show

**Have Met
(Initials Required)**

- _____ 1. Show must be a working partner with the HSD Program.
- _____ 2. Show will affiliate with _____ HIO.
- _____ 3. Show must be in its first three years of existence.
- _____ 4. Show must agree to reasonably publicize and recognize the contributions of TWHBEA and the HSD Program.
- _____ 5. Show will receive grant funding based on its overall need and subsequent level of success. After the three-year program, limited administrative and staff support will remain available to show management. Please check the grant request that applies to your show.
Year 1 _____ An amount not to exceed \$1,000.
Year 2 _____ An amount not to exceed \$750.
Year 3 _____ An amount not to exceed \$500.
- _____ 6. Show shall not be held within a 150 mile radius of another HSD-partnered horse show on the same date.
- _____ 7. If the show contains classes for other breeds of horses, at least 50% of the classes must be for Tennessee Walking Horses.



TWHBEA HSD Regular Horse Show Final Report

Name of Show: _____

Location of Show: City: _____ State: _____

Date of Show _____ Judge for Show _____

Estimated Spectator Attendance _____

Total Number of Entries _____

Entry Fees Collected \$ _____

Sponsorships Collected (Not TWHBEA) \$ _____

TWHBEA "Seed" Sponsorship (if applicable) \$ _____

Total Prize Money Offered \$ _____

Total Income \$ _____

Total Expenditures \$ _____

Net Gain (Loss) from Show \$ _____

Amount of money that has been forwarded (or will be) to a charitable project or philanthropic organization. \$ _____

Name of charitable project or organization:

Number of active members in your association or club _____

Number of active members who worked on your event _____



Name of Show: _____

Contact: _____

Location of Show: _____

Date of Show: _____

Phone: _____

Option #2 - Criteria for Existing Horse Show

**Have Met
(Initials Required)**

- _____ 1. Show must be a working partner with the HSD Program.
- _____ 2. Show will affiliate with _____ HIO.
- _____ 3. Show must agree to reasonably publicize and recognize the contributions of TWHBEA and the HSD Program.
- _____ 4. Show will receive grant funding based on its overall need and subsequent level of success. All existing shows must provide a three year profit loss to be considered. These shows will then have to be reviewed by the committee.
- _____ 5. Show shall not be held within a 150 mile radius of another HSD-partnered horse show on the same date.
- _____ 6. If the show contains classes for other breeds of horses, at least 50% of the classes must be for Tennessee Walking Horses.

Existing horse show grant money is determined based on expressed need, and is determined by the Horse Show Committee.



Name of Show: _____

Location of Show: _____

Date of Show: _____

Number of Members on show Committee: _____

Time spent preparing for show: _____

2007 Profit Loss Amount: _____

Sponsorships collected for show: _____

Reasons you feel the show to loss money: _____

2006 Profit Loss Amount: _____

Sponsorships collected for show: _____

Reasons you feel the show to loss money: _____

2005 Profit Loss Amount: _____

Sponsorships collected for show: _____

Reasons you feel the show to loss money: _____

What needs as an existing horse show do you have?



TWHBEA HSD Post Horse Show Final Report

Name of Show: _____

Location of Show: City: _____ State: _____

Date of Show _____ Judge for Show _____

Estimated Spectator Attendance _____

Total Number of Entries _____

Entry Fees Collected \$ _____

Sponsorships Collected (Not TWHBEA) \$ _____

TWHBEA "Seed" Sponsorship (if applicable) \$ _____

Total Prize Money Offered \$ _____

Total Income \$ _____

Total Expenditures \$ _____

Net Gain (Loss) from Show \$ _____

Amount of money that has been forwarded (or will be) to a charitable project
or philanthropic organization. \$ _____

Name of charitable project or organization:

Number of active members in your association or club _____

Number of active members who worked on your event _____



Name of Show: _____

Contact: _____

Location of Show: _____

Date of Show: _____

Phone: _____

Option #3 - Criteria for TWHBEA Versatility Show

Have Me (Initials Required)

- _____ 1. All entries must be registered Tennessee Walking Horses with TWHBEA.
- _____ 2. Versatility Show will affiliate with _____ HIO.
- _____ 3. Versatility Shows must contain a minimum of 13 classes, which must be:

Barrel Racing	Showmanship at Halter (Youth)
Basic Reining	TWH Over Fences
Equitation (Youth)	Trail Obstacles
Model (Youth)	Water Glass (Youth)
Model (Adult)	Water Glass (Adult)
Pleasure Driving	Western Riding
Pole Bending	
- _____ 4. Versatility Shows must also contain a minimum of 6 rail classes, selected from:

English Plantation Canter (Youth)	Western Plantation Canter (Youth)
English Plantation Canter (Adult)	Two Gait Plantation (Youth)
Two Gait Plantation (Adult)	Western Plantation Canter (Adult)
- _____ 5. A signed letter/show bill/official program demonstrating that the Versatility Show Board, or management for said show, will follow all criteria and guidelines set forth by TWHBEA must be received in the office of TWHBEA before any financial assistance is granted and issued.
- _____ 6. Versatility Shows must send their request for approval 120 days before the show date and include within that correspondence the officers, contact persons, date, classes they wish to offer, fee structure, and the basic rules which will govern the conduct of their versatility show.
- _____ 7. All versatility shows are required to use only approved TWHBEA Versatility Show ribbons and trophies for Versatility Show classes.
- _____ 8. All participating Versatility Shows must send a final report to TWHBEA which will serve to record comprehensive data regarding the business administration of said Versatility Show. This final report is due no later than 30 days from the close of the Versatility Show or November 15th, whichever comes first. A Profit/Loss statement is required, and must accompany Final Report.

*As recommended by the TWHBEA Pleasure Horse Committee October 1998
And approved by the TWHBEA Executive Committee November 1998*

TWHBEA Regional Versatility Final Report

Name of Versatility Show: _____

Location of Show: _____ City: _____ State: _____

Date of Show _____ Judge for Show _____

Held in Conjunction with _____ Show

Required Classes:

Shown (Entries)

Barrel Racing	_____
Basic Reining	_____
English Plantation Canter (Youth)	_____
English Plantation Canter (Adult)	_____
Two Gait Plantation (Youth)	_____
Two Gait Plantation (Adult)	_____
Equitation (Youth)	_____
Model (Youth)	_____
Model (Adult)	_____
Pleasure Driving	_____
Pole Bending	_____
Showmanship at Halter (Youth)	_____
TWH Over Fences	_____
Trail Obstacles	_____
Water Glass (Youth)	_____
Water Glass (Adult)	_____
Western Riding	_____
Western Plantation Canter (Youth)	_____
Western Plantation Canter (Adult)	_____
(If other classes offered, please furnish complete show bill with number of entries)	_____

TOTALS: _____

Profit & Loss Summary (Detailed Profit and Loss under Separate Cover)

Total Fees Collected:

All Day Fees	_____
Other Entry Fees	_____
Sponsorships Collected (Not TWHBEA)	_____
TWHBEA "seed" Sponsorship (if applicable)	_____
Total Prize Money Offered (if applicable)	_____
Total Income	_____
Total Expenditures	_____
Net Gain (Loss) from Versatility Show	_____
Estimated Spectator attendance	_____

Versatility Show Chairman

Date

Versatility Show Secretary

Daytime Phone

Fax

Please complete analysis on reverse.

Analysis of Entries And Horses

Attention Secretary/Treasurer: Please provide the TWHBEA an accurate assessment of the following questions. Information will be collected and processed for statistical reference.

Number of horses participating in your versatility segment/show _____

Number of entries participating in your versatility segment/show _____

Number of horses participating in your complete horse show _____

Number of entries participating in your complete horse show _____

Number of Tennessee Walking Horses participation in your horse show _____

Number of horses representing other gaited breeds participation in your horse show _____

High Point Adult Winner (optional):

Name _____

Address _____

Horse/Registration Number _____

High Point Youth Winner (optional):

Name _____

Address _____

Horse/Registration Number _____

Overall Versatility Champion (optional):

Name _____

Address _____

Horse/Registration Number _____

_____ Amount of money that has been forwarded (or will be) to any charitable project or philanthropic organization regardless of amount

Organization/Project: _____

Number of active members in your association or club _____

Number of active members who worked on your event _____



Name of Show: _____

Contact: _____

Location of Show: _____

Date of Show: _____

Phone: _____

Option #4 - Criteria for TWHBEA Regional Futurity

Have met (*initials required*)

- _____ 1. All entries must be nominated for the Regional Futurity and must be registered Tennessee Walking Horses with TWHBEA.
- _____ 2. Futurity will affiliate with _____ HIO.
- _____ 3. Futurities must contain a minimum of 8 classes, which must be:
- | | |
|------------------|----------------------------|
| Weanling Colts | Two-Year-Old Plantation |
| Weanling Fillies | Two-Year-Old Performance |
| Yearling Colts | Three-Year-Old Plantation |
| Yearling Fillies | Three-Year-Old Performance |
- _____ 4. A signed letter/show bill/official program demonstrating that the Regional Futurity Board, or management for said futurity, will follow all criteria and guidelines set forth by TWHBEA must be received in the office of TWHBEA before any financial assistance is granted and issued.
- _____ 5. Regional Futurities must send their request for approval 120 days before the show date and include within that correspondence the officers, contact persons, date, classes they wish to offer, fee structure, and the basic rules which will govern the conduct of their futurity.
- _____ 6. All Futurities are required to use only approved TWHBEA Regional Futurity ribbons and trophies for Regional Futurity classes.
- _____ 7. Each new Regional Futurity must structure a futurity nominating system and fees. This system will remain active for subsequent years unless changes are made to the original filing of the nominating system.
- _____ 8. All participating Regional Futurities must send a final report to TWHBEA which will serve to record comprehensive data regarding the business administration of said Regional Futurity. This final report is due no later than 30 days from the close of the Regional Futurity or November 15th, whichever comes first. A Profit/Loss statement is required, and must accompany Final Report.

*As recommended by the TWHBEA Horse Show Committee March 17, 1998
and approved by the TWHBEA Executive Committee March 30, 1998*

TWHBEA Regional Futurity Final Report

Name of Futurity: _____
 Location of Futurity: City: _____ State: _____
 Date of Futurity _____ Judge for Futurity _____
 Held in Conjunction with _____ Show _____

	NOMINATED	SHOWN
Number of Weanling Fillies	_____	_____
Number of Weanling Colts	_____	_____
Number of Yearling Fillies	_____	_____
Number of Yearling Colts	_____	_____
Number of Two Year Old Lite-Shod – Halter	_____	_____
Number of Two Year Old Lite-Shod Plantation	_____	_____
Number of Two Year Old Plantation – Halter	_____	_____
Number of Two Year Old Plantation	_____	_____
Number of Two Year Old Performance – Halter	_____	_____
Number of Two Year Old Performance	_____	_____
Number of Three Year Old Lite-Shod – Halter	_____	_____
Number of Three Year Old Lite-Shod Plantation	_____	_____
Number of Three Year Old Plantation – Halter	_____	_____
Number of Three Year Old Plantation	_____	_____
Number of Three Year Old Performance – Halter	_____	_____
Number of Three Year Old Performance	_____	_____
(If other classes offered, please furnish complete show bill with number of entries)	_____	_____

TOTALS: _____

Total number of nominated Sires _____
 Total number of nominated Dams _____

High Point Sire: (name/registration number) _____

Owner: _____

High Point Dam: (name/registration number) _____

Owner: _____

Graduate Award: (name/registration number) _____

Owner: _____

Profit & Loss Summary (Detailed Profit and Loss under Separate Cover)

	TOTAL AMOUNT ASSESSED	AMT. PER NOMINATION
Stallion nomination fees	_____	_____
Mare nomination fees	_____	_____
Weanling nomination fees	_____	_____
Yearling nomination fees	_____	_____
Two Year Old nomination fees	_____	_____
Three Year Old nomination fees	_____	_____
Futurity Class entry fees	_____	_____

Sponsorships Collected (not TWHBEA) _____
Amount of TWHBEA Assistance _____
Total Futurity Prize Money Offered _____
Total Futurity Income _____
Total Expenditures _____

Net Gain (Loss) from Futurity _____

Estimated spectator attendance _____

Futurity Chairman

Date

Futurity Secretary

Phone

Fax

_____ Amount of money that has been forwarded (or will be) to any charitable project or philanthropic organization regardless of amount

Organization/Project: _____

Number of active members in your association or club _____

Number of active members who worked on your event _____