Paso Fino Horse Association, Incorporated

4067 Iron Works Parkway, Lexington, KY 40511 (859) 689-3700 FAX (859) 689-3702 www.pfha.org

ENDURANCE RIDE APPLICATION

RIDER:
Last Name: _____ First Name: _____ Middle Initial ____
PFHA Membership Number: _____ (Pending if new PFHA member) PFHA Region _____
Address: _____
City: _____ State: _____ Country: _____ Zip: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Fax: _____ E-Mail Address: _____
Rider's Signature: _____ Date: _____(MM/DD/YYYY)

HORSE THAT WAS RIDDEN:
Horse's Name: _____ PFHA Registration Number: _____
Sex of the Horse: _____ Owner's Name: _____ Owner's PFHA Membership Number: _____
Name of the Trail Ride: _____ Date of the Ride: _____(MM/DD/YYYY)
Endurance Ride Organization:
_____
Address: _____
City: _____ State: _____ Country: _____ Zip: _____
Phone: _____ Fax: _____

TOTAL MILES COMPLETED WITH FIT HORSE:	_____	POINTS: _____
PLACEMENT FOR TIME FINISHED IN RIDE (if 1st through 10th)	_____	POINTS: _____
PLACEMENT FOR BEST CONDITION AWARD (if 1st through 10th)	_____	POINTS: _____
PLACEMENT FOR POST-RIDE VET CHECK	_____	POINTS: _____
OVERALL FINAL IMPRESSION SCORE:	_____	POINTS: _____
		TOTAL POINTS: _____

Name of the Ride Manager or Secretary: _____ Signature: _____
Home Phone: _____ Cell Phone: _____ Work Phone:_____

Please refer to Chapter Seven of the Paso Fino Horse Association Rule Book for rules governing the Endurance Rides.
1. Current PFHA members who participate in endurance rides on registered Paso Fino horses are eligible to apply for points for their horses for each successfully completed ride.
2. Rides must be organized by organizations that are sanctioned by PFHA. PFHA Pre-approved organizations:
   All Paso Fino Horse Association Regions . . . . . .(PFHA) American Endurance Ride Conference . . . . . (AERC)
   Southeast Endurance Riders Assoc . . . . . (SERA) South Eastern Distance Riders Assoc . . . . . .(SEDRA)
   Upper Midwest Endurance and Competitive Ride Assoc. . . (UMECRA)
3. PFHA awards the Endurance Horse of the Year to the participant's horse with the most sanctioned points. Horse's points accrued in the program are applied toward Society of Merit Awards.

METHOD OF PAYMENT: (Do Not send cash.) ☐ Check/Money Order Payable to PFHA ☐ VISA ☐ MASTERCARD ☐ AMEX
Amount Paid $_____
Card Number: _____ Expiration Date: _____ Security Code: _____
Card Holder's Name: _____
Card Holder's Address: _____
Card Holder's City: _____ State: _____ Country: _____ Zip: _____
Card Holder's Home Phone: _____ Cell Phone: _____ Work Phone: _____
Card Holder's Fax: _____ E-Mail Address: _____
Card Holder's Signature: _____

INSTRUCTIONS FOR PROCESSING THIS FORM:
1. This form is used to submit the PFHA member's points earned for completion of an endurance ride.
2. Form must be postmarked within twenty (20) days following the ride
3. In addition to this form complete with signatures of the Trail Ride Officials, submit
   a. A copy of the Completed Entry Form issued by the Ride Management of the Endurance Trail Ride
   b. A copy of the Completed Endurance Trail Ride vet/ride book or scorecards issued by Ride Management
   c. $10.00 processing fee
4. Mail this form and all items listed in 3. above to:
   Paso Fino Horse Association,
   4067 Iron Works Parkway
   Lexington, KY 40511