

# Nevada Quarter Horse Association

## Request of Approval Form Trail Rides

Trail Ride location \_\_\_\_\_ Ride Date(s): \_\_\_\_\_

Trail Trial \_\_\_\_\_ Trail Ride Only \_\_\_\_\_

Ride Contact Person \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

***Please remit this form with and payment of \$10.00 to:***

***NQHA***

***c/o HC 64 Box 27***

***Deeth, NV 89823***

I, \_\_\_\_\_, agree to abide by the standing rules of the Nevada Quarter Horse Association and will adhere to the terms of this contract if approved by the board of NQHA.

Ride Contact Person \_\_\_\_\_

NQHA Secretary \_\_\_\_\_

NQHA President \_\_\_\_\_

\_\_\_\_\_ Approved date: \_\_\_\_\_ Agreement for charges: \$10

\_\_\_\_\_ Approval Denied Reason: \_\_\_\_\_