



EVENT PAYMENT AUTHORIZATION

Please include the Event name and the NRHA ID numbers of the Show Secretary and the Responsible Party.

EVENT NAME: _____ **EVENT #:** _____
SHOW SECRETARY: _____ **NRHA ID#:** _____
RESPONSIBLE PARTY: _____ **NRHA ID#:** _____

Please select the applicable fees you would like to charge to the credit card. The completed form may be submitted to NRHA at shows@nrha.com.

- **Trophies & Shipping** (If applicable)
 - **Application Fee** (Jackpot Affiliate or Ride & Slide type of show)
 - **Approval Processing Fee**
 - \$25 C & D Level Events
 - \$50 B & BB Level Events
 - \$75 A & AA Level Events
 - **NRHA 5% Show Fees**
 - **NRHA Medication Fees** (USA & CAN only)
 - \$10 per horse per event
 - AA Level & ARC Events – \$35 per horse per event
 - **Late Show Fee**
 - **Show Results Processing Fee** – Effective January 1st, 2025
- CSV Uploaded by NRHA Office**
- \$50 C & D Level Events
 - \$100 B & BB Level Events
 - \$250 A & AA Level Events
- Results that Require Manual Entry**
- \$100 C & D Level Events
 - \$250 B & BB Level Events
 - \$500 A & AA Level Events

NRHA is authorized to charge the included credit card as a payment method for applicable fees.

Submitted to NRHA on _____ (date).

Signature: _____

PAYMENT Visa Discover MasterCard American Express

Card #	Expiration Date (MM/YY)	CSV #
Cardholder Name (Please print)	Cardholder Signature	Date

MAIL: NRHA; 3021 W. Reno Avenue, Oklahoma City, Oklahoma 73107 ~ EMAIL: shows@nrha.com

FOR OFFICE USE ONLY

Rev. 1/2025

Date Received: _____

Invoice: _____