

## **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 PAR		NRHA ID#:			
	applicable fees you would		•		
completed	d form may be submitted t	O NRHA	at <u>sn</u>	ows@nrna.com.	
o Trophies & Sh	ipping (If applicable)	o <b>I</b>	Late S	Show Fee	
<ul> <li>Application Fe</li> </ul>	ee (Jackpot	0	Show	Results Processing Fee –	
Affiliate or Ride	e & Slide)	1	Effective January 1st, 2025		
<ul> <li>Show Approval Processing Fee</li> </ul>		•	<b>CSV Uploaded by NRHA Office</b>		
o \$25 C &	D Level Events		0	\$50 C & D Level Events	
。 \$50 B &	BB Level Events		0	\$100 B & BB Level Events	
o \$75 A & .	AA Level Events		0	\$250 A & AA Level Events	
o NRHA 5% Show Fees		I	Results that Require Manual Entry		
o NRHA Medica	tion Fees (USA & CAN only)		0	\$100 C & D Level Events	
o \$10 per l	horse per event		0	\$250 B & BB Level Events	
o AA Leve	l & ARC Events – \$35 per		0	\$500 A & AA Level Events	
horse pe	er event				
NRHA is authorized to	o charge the credit card listed	d as a pay	ment	method for applicable fees.	
Submitted to N	NRHA on	(dat	te).		
Signature:					
PAYMENT   Visa	] Discover □ MasterCard □ Americ	an Express			
Card #	Expiration	Expiration Date (MM//YY)		CSV #	
Cardholder Name (Plea	ase print) Cardholde	er Signatu	re	Date	