CHAPTER 4
REGISTRATION
FOR FAIRS,
SEMINARS AND
MINI-CONVENTIONS
Section A Planning your registration information

It is important when making your registration forms to be specific and include all areas of your event, i.e. clinics, horses shows, patron programs, etc.

The following samples of successful forms from previous events should be used as a guide and the tailored to your specific needs.

SAMPLE FAIR OR MIN-CONVENTION PROGRAM BOOKLET

Contact: Jack Johnson, (123) 456-7890 day or evening

Advertising fees:
- 150.00 Full page
- 75.00 half page
- 250.00 full page inside front or inside back covers
- 450.00 full page back outside cover

All ads are black and with only. All ads must be delivered to Jack Johnson no later than (date) and must be completely camera ready to qualify for the above price. Only full, half and quarter size space will be sold. Business cards submitted for ads may be enlarged in size. Cover of the program will include the fair or mini convention logo. Booklet pages will be 8 1/2” by 11” in size. Information (agenda, art auction times, hotel information, lists of speakers and patrons, raffle information and commercial exhibitors) will be provided to each seminar attendee at registration time, as well as all sponsors and advertisers.

Reprints are available of all full and half page advertisements. Order must be made at time of ad placement.

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>80.00 –</td>
<td>250</td>
</tr>
<tr>
<td>90.00 –</td>
<td>500</td>
</tr>
<tr>
<td>100.00</td>
<td>1000</td>
</tr>
<tr>
<td>125.00</td>
<td>2000</td>
</tr>
<tr>
<td>140.00</td>
<td>2500</td>
</tr>
</tbody>
</table>

Inclusion of flyers or brochures in the mailing to over 5000 attendees is $200.00. 5,000 brochures or flyers must be provided. Absolute deadline (date).

SAMPLE YOUTH BOWL/HIPPOLOGY COMPETITION

Contact: Sue Smith (312) 111-2222 or suesmith@anyemail.com

Fee: $25.00 (Fee is included in Youth Seminar fee but youth must be pre-registered to compete)

Includes: Admission to all lectures and panel discussions, as well as all open events. Youth also have the opportunity to compete in the Youth Bowl and hippology Competition to be held Saturday (date) from 8:00 am to noon. Youth must check in by 8:00 am Saturday morning for schedules. Ribbons (through tenth place) and prizes will be awarded to the top individual in each of the two age groups; 13 & under and 14 – 17. First place youth in each age group will win a registered purebred Arabian gelding. Teams will also be ranked and team prizes awarded for the first three teams placing in each age group.

Geldings have been generously donated by Arabian Breeder. This competition is not limited to Arabian horse Club youth. Other organizations and 4-H should be encouraged to attend and compete.
SAMPLE ART AUCTION

CONTACT: JUNE JACKSON (123) 456-7890

FREE ADMISSION OPEN TO THE PUBLIC

LOCATION: BANQUET HALL USA, 1234 Main St, Main Town

INCLUDES: Approximately fifteen pieces of artwork will be auctioned to the highest bidder, No reserve.

NOTES: Prices paid last year ranged from 30.00 to 2,500.00. A number of widely acclaimed Arabian horse artist will be represented with original oils, water colors, bronzes, jewelry and other works. Auction items will be displayed in the Commercial Exhibit are on Friday and Saturday prior to the auction.

SAMPLE FASHION SHOW

CONTACT: JANE JACKSON (123) 456-7890

FREE ADMISSION OPEN TO THE PUBLIC

LOCATION: BANQUET HALL USA, 1234 Main St, Main Town

INCLUDES: Approximately 30 – 45 minute presentation of various attire for English, Western, Hunter and more.

Services donated by Arabian Fashion Inc.

SAMPLE BANQUET/RECEPTION

EVENT: Annual Banquet

LOCATION: BANQUET HALL USA, 1234 Main St, Main Town

Date: and time ??????

Call or return this form by (date) to:
Mary Smith, 123 Any Street, Colt Town, Any State 12345
(123) 321-1234

FEE: $45.00 Adults (50.00 after (date))

 ______ New York Strip
 ______ Chicken Marsala

30.00 Youth (35.00 after (date))

 ______ New York Strip
 ______ Chicken Marsala

INCLUDES: Free hors d’oeuvres before dinner (cash bar).
SAMPLE RAFFLE

Don’t forget our fabulous Raffle!
Buy your tickets Early!
Please Join us in Thanking the Generous Donors!

Proceeds for this raffle to toward ____________

Contact: John Smith (home) 456-654-1234 or (office) 456-654-7890

The AHA CLUB Raffle Prizes Include:

- Custom Show Halter. Donated by Show Halter Inc. (value $$)
- Sculptured Farm Sign by Farm Signs Unlimited – Custom made for your farm, home or business. Donated by Farm Signs Unlimited (value $$)
- An English or Western Saddle (your choice) Donated by The Best Tack Shop, Anytown, USA (value $$)
- Deluxe Escape Weekend for Two. Donated by Any Hotel, Any Town, USA. (value $$)
- Silver Necklace, Donated by Jewelry Supply Ltd. (value $$)
- $50.00 Gas Card, Donated by Anyone
- $250.00 Gift Certificates. Donated by Best Event Vendor you can apply toward your purchase at Best Event Vendor.

Ticket available at the AHA Club Booth or from any AHA Club Member

Donation: $1.00 per ticket or $5.00 for a book of 6

Drawing will be held Sunday afternoon at the AHA Club Annual Arabian Horse Show (date)

Winners need not be present!

SAMPLE SEMINAR

CONTACT: JANE DOE (222) 222-3333 for registration.

LOCATION: BANQUET HALL USA, 1234 Main St, Main Town

Date: and time  ??????

Fee:  Early Bird (By date)  After (early Bird Date)  
      55.00 Adults  65.00 Adult  
      25.00 Youth (18 & under)  35.00 Youth (18 & under)

Includes: Admission to all lectures and panel discussions. To all open events (i.e., Commercial Exhibits Booths, Art Auction, etc): Coffee, Tea and pastries each morning. Soft drinks during the lunch break. All bars as strictly cash bars. Each attendee is responsible for their own lunch.
Seminar & Demonstrations

With Mr. Performance Trainer – Performance and Mr. Halter Trainer – Halter

Location: Mary Jane Doe Stable’s
123 Filly St, Anytown, Anystate, 00000

Date Saturday (date) and Sunday (date)
9 am - Western Demo
10 am – English Demo
Halter Demo both days after the performance demo

Riders Name______________________________________ AHA #_______________
Address______________________________________________________________
City_________________________________________ State _________ Zip_______
Horse’s Name to be used in clinic_________________________________
Horses Age_________

COST
Performance $100.00 Region 00 members $150.00 non-members
Halter $75.00 Region 00 members $100.00 non-members
Audit/Spectator (each day) $15.00 Region 00 members $20.00 non-members

Membership cards must be presented to get discount.

Please select which clinic/s and day/s you would like:
Performance Saturday (Date) Sunday (Date) Amount Due:_____
Halter Saturday (Date) Sunday (Date) Amount Due:_____
Audit/Spectator Saturday (Date) Sunday (Date) Amount Due:_____

There will be a limited number of stalls available for those needing overnight accommodations. Stalls will be $$$$ per night.
Each clinic will run for approximately one hour.
Please be ready to begin at your designated time.
You may call after (DATE) for your clinic time.
All clinic times will be on a first come first serve basis and every effort will be made to ensure everyone will have a spot HOWEVER Reservations must be RECEIVED no later than (DATE).
Reservations received after (DATE) will be subject to time slot availability.

Make Checks payable to REGION 00

Please mail to
Mary Jane Doe, 123 Filly St, Anytown, Anystate, 00000

Questions? Call 123-321-3333, Barn – 123-321-3334 for more information or email maryjanedoe@anyemail.com
SAMPLE HOTEL RESERVATION FORM

AHA CLUB SEMINAR (DATE)

NAME ____________________________________________

ADDRESS ____________________________________________

CITY ______________________ ST ______ ZIP ____________

PHONE ____________________________________________

RESERVATIONS MUST BE MADE BY (DATE) TO GET THE SPECIAL AHA RATE
Please indicate number of rooms you wish to reserve:

_______ Single King @ 89.00/night
   Arrival date: ______________________________
   Departure date: __________________________
   _____Smoking or _____Non Smoking

_______ Double Queen @ 89.00/night
   Arrival date: ______________________________
   Departure date: __________________________
   _____Smoking or _____Non Smoking

If you want your room(s) guaranteed for late arrival (after 6:00pm) please
include credit card information or a check for one night’s deposit for each room:

<table>
<thead>
<tr>
<th>Name on CC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Credit card type (circle one)</td>
</tr>
<tr>
<td>Credit Card #</td>
</tr>
<tr>
<td>Exp Date</td>
</tr>
<tr>
<td>CC Billing address (include zip)</td>
</tr>
</tbody>
</table>

PLEASE MAIL TO:
ANY HOTEL
ANY STREET
ANYTOWN, 00000
<table>
<thead>
<tr>
<th>LIST ALL NAMES</th>
<th>Check appropriate items</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Name ________________________</td>
<td>Seminar (Adult @ $)</td>
<td>______</td>
</tr>
<tr>
<td>Address ________________________</td>
<td>Seminar (Youth @ $)</td>
<td>______</td>
</tr>
<tr>
<td>______________________________</td>
<td>Banquet (Adult @ $)</td>
<td>______</td>
</tr>
<tr>
<td>Telephone ______________________</td>
<td>Banquet (Youth @ $)</td>
<td>______</td>
</tr>
<tr>
<td>Birthdate (youth only) _________</td>
<td>Youth Bowl/hippology</td>
<td>______</td>
</tr>
<tr>
<td>2. Name ________________________</td>
<td>Seminar (Adult @ $)</td>
<td>______</td>
</tr>
<tr>
<td>Address ________________________</td>
<td>Seminar (Youth @ $)</td>
<td>______</td>
</tr>
<tr>
<td>______________________________</td>
<td>Banquet (Adult @ $)</td>
<td>______</td>
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<td>______</td>
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<tr>
<td>3. Name ________________________</td>
<td>Seminar (Adult @ $)</td>
<td>______</td>
</tr>
<tr>
<td>Address ________________________</td>
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<td>Youth Bowl/hippology</td>
<td>______</td>
</tr>
<tr>
<td><strong>Total</strong>________</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I belong to ______________________ Club in Region ______. If applicable.

I would like additional information on:
- ☐ Exhibit Space  ☐ Patron Program
- ☐ Raffle Tickets  ☐ Advertising in Program
- ☐ I am coming as a youth team

Team name ____________________________

As parent and/or guardian for the above youth participant, I give my permission for him or her to accept the prize of an Arabian Horse should he or she win.

As parent and or guardian for the about youth clinic participant, I hereby consent to accept responsibility for the participant of said Minor in this clinic. We agree to abide by the applicable terms and rules, and further agree that instructors and officials and their staffs will not be held responsible for any accident or damage to horses, property, or any participant or spectator. The exhibitors shall hold them harmless and indemnify them against any legal proceedings arising from any such accident of damage.

Signature of Parent and/or Guardian
SAMPLE FAIR REGISTRATION FORM

Registration
Please register me for the AHA Region 00 2010 Arabian Extravaganza at the Expo Center, Anytown, Any State, (Date).

Name______________________________________________________________
Address________________________________________________________________
City/State/Zip_______________________________________________________
Phone #_____________________________________________________________

Registration Fees

_____ Adult $40.00 each (does not include Saturday evening meal) _________
_____ Adults $55.00 a day after closing of registration (date) _________________
_____ Juniors $20.00 per day or 35.00 for both days __________________________
(does not include Saturday evening meals) ________________________________
_____ Saturday Night Meal $15.00 per person ($20.00 after (date)) ___________
_____ Sponsor $150.00 each.
Includes one Adult package and Saturday night meal ______________________
_____ Stallion Row $250.00 per stallion.
Includes one Adult package and Saturday night meal. ______________________
_____ Commercial Exhibits $75.00 – 10 X 10 space __________________________

Total submitted ___________

Fees are payable in advance to Region 00:
C/O: (Contact info with address phone and email)

Hotel Information
Make your reservations early – Special room rates at:
1. Any Hotel, Any City, Any State 00000 Phone 111-222-3333
2. Any Hotel, Any City, Any State 00000 Phone 222-333-4444

REGION 00 STALLION SERVICE AUCTION

TO ALL MEMBERS OF REGION 00
Region 00 has an exciting Regional Futurity and Youth Benefit program. Region 00 Stallion owners have generously donated breedings to be auctioned at the Region 00 Extravaganza in Any Town on (date). Proceeds from the auction will be divided equally between a Regional Futurity and a Youth Foundation to benefit the Youth of Region 00. Details of the program are attached.

You can benefit in three ways:
1. Buy one or more breeding to these fine stallions for a (year) breedings for your mares.
2. Gain entry to an exclusive Futurity. There is no entry except through these breedings.
3. Help Fund the Region 00 Youth Foundation

A list of the stallion services available and their advertised stud fee is attached. We encourage all bidders to be present at the auction at the Extravaganza or be represented by an agent. However, if it is not possible, we have designated a proxy bidder. You may phone or mail instruction on your bid. You can designate a maximum bid on a stallion.
TOTAL FEES: Transfer to Show Entry Form

Youth Judging Package I

Package II

Package III

GAME FEES: (see Prize List for explanation)

SCHOOLING SHOW: Classes Entered

Signed by a Games Package at Full Rate.

Debit $2.00 if member of your immediate family is

SIGNATURE

Youth Judging

Trail

Halter

Hunter

Wes. P. Horse

End. P. Horse

Country P. Horse

INSTRUCTIONAL SESSIONS: Write number 1 through 6 to indicate your order of preference and place in the appropriate column.

INSTRUCTIONS: Write your 1 through 6 to indicate your order of preference and place in the appropriate column.

COMPLETE THIS SECTION

Name: 

Age: 

Color: 

Sex: M G S

Phone: 

Birthdate: 

Name: 

Address: 

Reason: 

Signature: 

Please enclose copy of 1993 Negative Coggins & Horse’s Registration Papers:

SAMPLE - PARTICIPANT REGISTRATION FORM