



# Paso Fino Horse Association, Incorporated

4067 Iron Works Parkway, Lexington, KY 40511 (859) 825-6000 FAX (859) 258-2125 www.pfha.org

## PLEASURE LONG DISTANCE TRAIL RIDE APPLICATION

**RIDER- Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **Middle Initial** \_\_\_\_\_  
**PFHA Membership #:** \_\_\_\_\_ (Note: Applied for 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 #:** \_\_\_\_\_  
**Sex of the Horse:** \_\_\_\_\_ **Owner's Name:** \_\_\_\_\_ **Owner's PFHA Membership Number:** \_\_\_\_\_  
**Name of the Trail Ride:** \_\_\_\_\_ **Date of the Ride:** \_\_\_\_\_ (MM/DD/YYYY)  
**Trail Ride Organization:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**TOTAL MILES RIDDEN:** \_\_\_\_\_ **POINTS:** \_\_\_\_\_  
**Name of the Ride Manager or Secretary:** \_\_\_\_\_ **Signature:** \_\_\_\_\_  
**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_  
**Fax:** \_\_\_\_\_ **E-Mail Address:** \_\_\_\_\_

Please refer to Chapter Seven of the Paso Fino Horse Association Rule Book for rules governing the Pleasure Trail Rides.

- Current PFHA members who participate in long distance trail rides on registered Paso Fino horses are eligible to apply for points for their horses for each successfully completed ride.
- Rides must be organized by organizations that are sanctioned by PFHA. PFHA Pre-approved organizations:
 

All Paso Fino Horse Association Regions . . . . (PFHA)	The Biltmore Saddle & Bridle Club . . . . . (Biltmore)
Front Range Pasos . . . . . (Front Range)	North Minnesota Arabian Horse Assoc . . . . (NMAHA)
Somerset Co. Horse & Pony Assoc . . . . . (SCHPA)	Tennessee Horse Council . . . . . (Tennessee)
South Creek Fox Hounds	Ride and Tie Organization
- All 10 to 20 mile training rides run in conjunction with American Endurance Ride Conference (AERC), North American Trail Ride Conference (NATRC), Eastern Competitive Trail Riders Association (ECTRA), and South Eastern Distance Riders Association competitions (SEDRA). All Club/Fun Rides of ten (10) or more miles if pre-approved by PFHA (10) or more business days prior to the ride date.
- PFHA awards the Pleasure Long Distance Trail 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 a pleasure long distance trail ride.
2. Form must be postmarked or faxed within 20 days of the ride EXCEPT in the case where the ride(s) occurs less than 20 days before the end of the PFHA year (August 31). In that case the paperwork must be postmarked or faxed with applicable fee no later than September 5<sup>th</sup>.
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 ride
  - b. \$10.00 processing fee
4. Mail this form and all items listed in #3 above to:
 

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