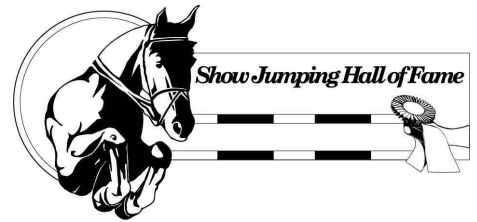


SHOW JUMPING HALL OF FAME JUMPER CLASSIC SERIES



2005 HORSE SHOW AGREEMENT FORM

(Please print or type, and please fill out a separate form for each horse show)

HORSE SHOW NAME _____

HORSE SHOW LOCATION _____

HORSE SHOW DATES _____ PRIZE MONEY OFFERED IN CLASS(ES) _____

WE WILL HOST THE FOLLOWING CLASS(ES) IN THE SHOW JUMPING HALL OF FAME SERIES:

AMATEUR-OWNER _____ JUNIOR _____ COMBINED JUNIOR/AMATEUR-OWNER _____

CLASS DATE(S): A-O CLASS _____ JR. CLASS _____ JR./A-O _____

HORSE SHOW CONTACT PERSON _____

PHONE _____ FAX _____

E-MAIL _____

HORSE SHOW BILLING ADDRESS _____

PHONE _____ FAX _____

E-MAIL _____

ADDRESS TO WHICH STANDINGS SHOULD BE SENT (DURING WEEK OF HORSE SHOW):

PHONE _____ FAX _____

PLEASE MAIL ORIGINAL AGREEMENT FORM(S) TO:

**Show Jumping Hall of Fame
C/o Classic Communications
38 Mechanic St., Ste. 101
Foxboro, MA 02035**

For more information about the Show Jumping Hall of Fame Jumper Classic Series
or the Show Jumping Hall of Fame and Museum, Inc.,
please visit www.showjumpinghalloffame.net or contact:

**Lisa Patterson or Marty Bauman
Phone: (508) 698-6810
Fax: (508) 698-6811
E-mail: classic.pr@verizon.net**