**ARABIAN HORSEMANS DISTRESS FUND**

**APPLICATION**

**LOSS OF REVENUE DUE TO SHOW CANCELATION**

BUSINESS NAME:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TRAINER/PROFESSIONAL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SHOW NAMES/DATES:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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APPLICATION REQUIREMENTS: You may apply for relief for lost revenue from a regular scheduled Class A or larger show due to COVID-19 emergency cancellation. This benefit is available to a training barn or other contract business entity that performs contract professional services to Arabian horse shows (show officials, secretaries, photographers, independent contractors, etc.). The amount available is up to $1300/application. Only one member of a training barn or business entity may apply. You must provide documentation that demonstrates amount of lost revenue for the designated show or lost professional fees. APPLICATION MUST BE FILLED OUT IN ITS ENIRETY TO BE CONSIDERED.

AHA current membership in good standing: Membership #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Expiration date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years as AHA member:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicants primary revenue source:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many shows were you not able to attend?\_\_\_\_\_\_\_\_\_\_

Please name the shows and dates:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2019 horses entered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2020 horses entered:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2020 estimated lost NET revenue (exclude unincurred expense:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you recently lost horses in training due to the virus? If so, how many?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you are in another horse show related business, what other sources of income have you lost due to virus cancellations?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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How many total training horses do you currently have in training if applicable?\_\_\_\_\_\_\_\_\_\_\_

THIS PROGRAM IS THE RESULT OF AN ANONYMOUS DONATION FOR THE SPECIFIC PURPOSE OF AIDING TRAINERS AND SHOW PROFESSIONALS WHO MIGHT BE SEVERELY IMPACTED BY THIS LOSS OF REVENUE.

THANK YOU TO THIS GENEROUS PERSON.

THE AHDF BOARD OF DIRECTORS WILL EVALUATE EACH APPLICATION AND DETERMINE THOSE WHO HAVE THE GREATEST NEED.

**Applicant signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_**

**Business Name for payment:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Best phone #/email address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please scan or photograph and return via email to [mary@trowbridgesltd.com](mailto:mary@trowbridgesltd.com),