

The American Hanoverian Society Home of The American Hanoverian Studbook & American Rhineland Studbook

2022 Inspection Tour Host Information

INSPECTION SITE NAM	ME:					
Inspection Date:						
Contact Person:						
Street Address:						
City, State, Zip:						
Telephone:		Best Time to Call:				
Alt. Phone:		Fax:				
E-mail:		Website:	Website:			
PLEASE FILL IN APPR Check the type of arena an			ELOW: be used for the Inspection:			
Outdoor Arena	Size:	Type of Footing:				
Indoor Arena	Size:	Type of Footing:				
Outdoor Paddock/Field		Type of Footing:				
Check the appropriate box	es regarding the Ma	re Performance Test:				
Not offered at this	site					
	ith the following spo ping phase must be	ecifications: held before the under sade	dle portion:			
Free Jumping		In Indoor Arena	Preferred Option			
		In Outdoor Chute	NOTE: Sites utilizing outdoor chutes			
need to speak with the Insp	pection Committee to	o discuss set-up.				
Under Saddle Test:	<u> </u>		Indoor Arena, Size, Footing			
	<u> </u>		Outdoor Arena, Size, Footing			
Is Warm-Up area available	e: Yes	No				
If Yes, specify whether Inc	loor/Outdoor, Type	of Footing:				

ORDER OF GO:

The order of go/schedule at each site typically follows a standard format jointly approved by the AHS Mare and Stallion Committee and the Hanoverian Verband.

- Registration
- Mare Performance Test Free Jumping
- Inspection of non-Hanoverian Mares
- Under saddle portion of the MPT
- Inspection of Hanoverian Mares
- Foal Presentations
- Futurity Classes

TIME SCHEDULE: *Note: The time schedule may be revised closer to the inspection date by the Site Host and the AHS Inspection Committee based upon site entries (number of horses) and the finalized travel schedule.*

Earliest Day/Arrival	Time:					
Registration Estimate	ed Start Time: _					
Inspection Estimated	Start Time:					
Other Schedule Notes	S:					
HOST SITE DETA Stabling/Veterinaria Will Stabling be Ava	an/Fee Policy	Yes No				
If yes, please answer	the following:	Is Stabling Limited	1?	Yes	No	
Type of Stalls Availa	ble:					
Cost, if applicable:	\$	/ per stall per nigh	t			
	\$	for the day				
	\$	Grounds Fee <i>if ap</i>	plicable			
		No Charge for Sta	bling			
Grounds Fee is	per horse OR	per owner	OR	per trailer		no grounds fee
Number of Stalls Ava	ailable:					
(numl	ber) permanent	stalls available on g	grounds			
(numl	ber) temporary	stalls available on g	grounds			
(numl	ber) of permane	ent stalls available _	miles	from site		
(numl	ber) of tempora	ry stalls available _	miles f	from site.		
Type of Bedd	ing:	Straw				
		Shavings				
		Other (please spec	cify)			
Bedding/Hay	available for pu	urchase on grounds		Yes	No.	

If there are any additional stabling notes/restrictions, please explain:

If there are any restrictions regarding arrival schedule, please explain:

Make Stabling Checks Payable to	:	
Payment should be made:	At time of reservations	Upon arrival
Refund policy:		
Name of Veterinarian who will be	on call:	
Veterinarian's Telephone Number	c	

BRANDING:

It is the responsibility of the host to either provide or arrange for the provision of a blacksmith's forge. <i>Note:</i>
Due to damage to brands, charcoal fires, pipes, gas grills and/or acetylene torches will not be used in lieu of
a forge. NO EXCEPTIONS.

Name of individual who will provide a blacksmith's forge:

ACCOMMODATIONS:

Please list two or three motels within easy travel distance of your inspection. We recommend including at least a couple of national chains such as Holiday Inn, Best Western, or Comfort Inn and Suites.

	Phone:		_ Miles from Site:
	Phone:		_ Miles from Site:
	Phone:		_ Miles from Site:
OTHER INFORMATION: This site will be limited to	number of horse OR	No Limit	
Health Requirements for incomin	g horses:		
Coggins Test Hea	alth Certificate (Other, explain on n	ext line:
Will Food be Available? If Yes, A Food will not be available		hase; OR	Compliments of Host
Spectator Seating Availab	le Near Arena		
No Dogs on Grounds;	Dogs welcome but must be leashed.		
Parking Limited OR	Parking Extensive		
Type of Parking Surface:			
Any Restrictions on lengths of tra	ilers coming in: If so, speci	fy:	

DIRECTIONS TO SITE:

 Name of facility where inspection will be held:

 Address of facility where inspection will be held:

 Phone Number of Facility:

List any additional site information: