	APPLICATION FOR TOURNAMENT SANCTION AMERICAN HORSESHOE PITCHERS ASSOCIATION OF INDIANA 305 E. SOUTH ST. MARTINSVILLE, INDIANA 46151		
New Providence	THIS FORM MUST BE RECEIVED ON OR BEFORE OCTOBER 1, OF CURRENT YEAR		
TYPE OF TOURNAMENT	INDIVIDUAL	DOUBLES	TEAM
TYPE OF AWARD	MONEY	THOPHIES	CHOICE OTHER
NAME OF TOURNAMENT			
TOURNAMENT DATES	(Day) (Mor	nth) (Year)	(Day) (Month) (Year)
STARTING TIMES			
PROMOTED BY	LEAGUE CHARTER #		
ENTRY FEE	\$		
-		G TO BE ADDED TO TH	E ENTRY FEES? YES NO
SPECIFY ALL STIPULATION	IS		PLEASE DO NOT WRITE IN THIS SPACESanction #Point PayingNon Point Paying Tournament Type Board approves granting of this sanctionBoard approves granting of this sanctionSignature of Chairperson
			good and valuable consideration, hereby agrees to conform and responsive to conform and the AHPA of Indiana governing
All advertisements must carry the wording "AHPA Sanctioned" and display the AHPA logo.			
It is understood that the app distinct portion or portions of			sole discretion may grant, a sanction for activity comprising a
IMPORTANT: THE APPLICANT MAY NOT AT ANY TIME ASSUME A SANCTION WILL BE GRANTED, REGARDLESS OF			
This application is subject to the final approval of the AHPA of Indiana Board of Directors			
Sanction applied for by:	Signature is requi		Date of Application: / /
Title:			Have you read this application?