

# SSMHA High Point

## This award program is to promote the showing of the Morgan Horse by SSMHA Youth and Amateurs.

1. All riders must be nominated on the official form. All information must be complete at time of submission.
2. All riders must be SSMHA members
3. All horses must be registered with AMHA.
4. All nomination fees must be paid at the time of nomination.
5. One horse/rider combination per nomination form & fee.
6. Nomination & fees paid between January 1 – March 31 will allow entire competition year for point accumulation. Nomination & fees made after April 1 will allow points to accumulate from the date when nomination form & fees paid or Post marked on envelope.
7. All classes “judged and placed” at shows/competition will count towards points.
8. Showing at any judged competition will count toward this HI Point award.
9. All show results are due by December 31 of competition year.
10. Fees are \$10 per horse/rider.

Awards will be given for Hi Point & Reserve for each category: Adult/Amateur (18 & older), Junior Exhibitor (under 18) and Walk Trot. Participant awards or ribbons will be given to every nominated horse/rider.

### Points:

#### All Breed Shows

Placing Points	<u>1</u> 10	<u>2</u> 9	<u>3</u> 8	<u>4</u> 7	<u>5</u> 6	<u>6</u> 5	<u>Participation</u> 2
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#### Class “A” Show

Placing Points	<u>1</u> 20	<u>2</u> 18	<u>3</u> 16	<u>4</u> 14	<u>5</u> 12	<u>6</u> 10	<u>7</u> 8	<u>8</u> 6	<u>Participation</u> 5
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#### Regional Show

Placing Points	<u>1</u> 25	<u>2</u> 23	<u>3</u> 21	<u>4</u> 19	<u>5</u> 17	<u>6</u> 15	<u>7</u> 13	<u>8</u> 11	<u>Participation</u> 7
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#### Grand Nationals

Placing Points	<u>1</u> 30	<u>2</u> 28	<u>3</u> 26	<u>4</u> 24	<u>5</u> 22	<u>6</u> 20	<u>7</u> 18	<u>8</u> 16	<u>9</u> 14	<u>10</u> 12	<u>Participation</u> 10
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# SSMHA High Point Nomination form

## Exhibitor Information

**Exhibitor Name:** \_\_\_\_\_ **Adult / Jr. Exhibitor / Walk/Trot**

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

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Home Phone #** \_\_\_\_\_ **Cell #** \_\_\_\_\_

**Email:** \_\_\_\_\_

## Horse Information

**Horse Name:** \_\_\_\_\_ **Registration #** \_\_\_\_\_

**Horse Color:** \_\_\_\_\_ **Horse Age:** \_\_\_\_\_

**Owners Name:** \_\_\_\_\_

**Owners Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Please send nomination form & payment to:**

**Jeff Jackson**

**6600 S. Triple XXX**

**Choctaw, OK 73020**

**\*\*\*\* Checks must be made to SSMHA \*\*\*\***