



## KDA Schooling Show Sanctioning Form

Show Name-\_\_\_\_\_

Location-\_\_\_\_\_

Show Date(s)-\_\_\_\_\_

Show Manager-\_\_\_\_\_

Address-\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Email-\_\_\_\_\_ Phone-\_\_\_\_\_

Judges-\_\_\_\_\_

Technical Delegate-\_\_\_\_\_

Show Secretary-\_\_\_\_\_

Your liability insurance form indicating KDA is an additional insured and this form may be mailed or scanned and email to Maureen John-

Maureen John, 1800 Cedar Point Road, LaGrange, KY 40031

Email- [maureenjohn@bellsouth.net](mailto:maureenjohn@bellsouth.net) phone 502-222-4322