

A M E R I C A N   **P A I N T**  
**H O R S E**   A S S O C I A T I O N

BRITISH COLUMBIA ZONE DECLARATION  
For Show Purposes Only

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

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

\_\_\_\_\_

EMAIL: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

I wish to be considered a member of the following Zone for the purposes of tabulating Zone awards and understand this must be submitted and approved before I begin showing for the year:

\_\_\_\_\_ Zone 1 (Idaho, Oregon, Washington, Montana, British Columbia and Alaska)

Or

\_\_\_\_\_ Zone 10 (Alberta, Manitoba, North West Territories, Saskatchewan and Yukon)

Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Please return to:  
APHA Performance Department  
Attn: Allyson Pennington  
122 E Exchange Ave, Suite 420  
Fort Worth, Tx 76164

Fax: 817-834-3152  
Email: [allysonp@apha.com](mailto:allysonp@apha.com)

