

Havana Sanction Request

Mail request to: Havana RBA, PO Box 376, Marion WI 54950

Host Club: _____

City, State of Show: _____

Will the club be using computer program? Yes No

Show Secretary

Name: _____

Address: _____

Email/Phone: _____

Show Superintendent

Name: _____

Email and phone: _____

ARBA Numbers required on form prior to mailing.

ARBA Open Sanction Number: _____ Date: _____

ARBA Open Sanction Number: _____ Date: _____

ARBA Open Sanction Number: _____ Date: _____

ARBA Open Sanction Number: _____ Date: _____

ARBA Youth Sanction Number: _____ Date: _____

ARBA Youth Sanction Number: _____ Date: _____

ARBA Youth Sanction Number: _____ Date: _____

ARBA Youth Sanction Number: _____ Date: _____

Additional Information:

Sanctions Fees:

Open \$10

Youth \$5.00

Open/Youth Combination (requested at same time) \$10.00

NOTICE: NSF Fee of \$30 for all returned checks.