



**SIERRA NEVADA HORSE SHOW ASSOCIATION**  
P.O. BOX 18701 \* RENO, NV 89511 \* [www.snhsa.org](http://www.snhsa.org)

**FORMAL COMPLAINT FORM**

**DATE** \_\_\_\_\_ **SHOW LOCATION** \_\_\_\_\_

**STEWARD** \_\_\_\_\_

**JUDGE (if applicable)** \_\_\_\_\_

**NAME OF MEMBER FILING COMPLAINT** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE #** \_\_\_\_\_

**PERSONS/HORSES INVOLVED WITH COMPLAINT** \_\_\_\_\_

\_\_\_\_\_

**WHAT HAPPENED (use back side of paper if necessary)** \_\_\_\_\_

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**CHECK FOR \$25.00 INCLUDED** \_\_\_\_\_

**SIGNATURE OF MEMBER** \_\_\_\_\_

**PLEASE GIVE FORM AND CHECK TO THE STEWARD**