

EXCA State/Regional Application

State or Regional? Circle one

Facility:

Address:

Facility Owner/Manager:

Contact Information for Facility and Event Coordinator:

Describe the Facility & the Type of Course: Indoor, Outdoor, Arena, etc.

Parking Accommodations for How Many Trucks/Trailers:

Camping and/or RV Hook Ups? Yes - No, How Many?

Number of EXCA Events Held at the Facility:

Dates of the Events:

Submitted by:

Signature:

Date: