

Is this horse Solid Paint Bred?
 YES or NO

OFFICIAL ENTRY FORM

Back Number

Complete 1 form per horse

Please have Registration Papers, Membership and Amateur cards, and Leases with you

APHA Reg # _____ PtHA Reg# _____ Horse Name _____ Yr Foaled _____ Sex: S M G

Owner _____ Full Address _____ City, ST, Zip _____
 (exactly as listed on papers)

	<u>OWNER</u>	Exhibitor 2	Exhibitor 3	Exhibitor 4
Exhibitor Name:	_____	_____	_____	_____
Exhibitor Address:	_____	_____	_____	_____
APHA Membership#/EXP date:	_____	_____	_____	_____
PtHA Membership#/EXP date:	_____	_____	_____	_____
AM / Youth EXP. Date:	_____	_____	_____	_____
AM / YOUTH D.O.B.	_____	_____	_____	_____
Am / Y. Relation to Owner or <u>Lease</u>	_____	_____	_____	_____

Class #	Class Name	Exhibitor	Class #	Class Name	Exhibitor
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Owner/Agent/Trainer: _____	Stall: # nites _____	Tack: # nites _____	12 Month Coggins
Phone Number: _____	RV: # nites _____	Shavings: _____	Accession # _____
E-Mail Address: _____	REMARKS: _____		Date Reported _____

Disclaimer: This show(show staff, agents, and managers) will not be responsible for any accident and/or injury that may occur to any rider, equipment or horse. Signing of entry form waives any claim against sponsoring organization and/or hosting facility. I hereby certify that every horse and rider is eligible to compete and am bound by the rules of APHA, PtHA and the show. I hereby consent to the entry of above listed exhibitors in this show and accept responsibility for their participation .

Exhibitor /Owner/Agent/Legal Guardian _____ Location _____ Date _____