## **SHOW NAME SHOW DATE**

Closing Date

DOB

Sex

Color

Horse USDF #

Reg. No.

Dam

SEND TO: Show Secretary Name Address/City/State/Zip Telephone

> Sweepstakes Yes No

Entry Fees

PLEASE TYPE OR PRINT/ONLY ONE OWNER PER ENTRY FORM. All entries must be complete. (Circle appropriate letter for rider/handler listed below the class.)

Name of First Horse

Sire

													Lilliy I CC3	
Class #		nandler C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	\$	
Class #	Rider/h A B		Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	\$	
	(Circle	e approp	riate letter fo	or rider/handler list	ted below.)	•		•	•	•	•	•	•	
	,		of Second H		,	Reg	. No.		DOB	Sex	Color	Sweepstakes Yes No		
	Sire					Dam				Horse USDF #			Entry Fees	
Class #	Rider/h A B	nandler	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	\$	
Class #		nandler	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	Class #	Rider/handler A B C	\$	
	1				THE FO	OLLOWING MU	JST BE SE	•	IR ENTRIE			1 2 0		
				F/EC, Membershi	-				lorses Regi	stration papers	& Purchase	contract if appli	cable	
OWNER I	NFORM	ATION	Owner nar	ne as it appears	on registra	tion papers/purc	hase contr	act						
Name	Name										Total Entry Fees\$			
If Joint owner check one Non Related Co Owner Related – What is the Relationship?										Office Fee (per horse) @\$				
AHA#USEF/EC#USDF#										USEF Fee @\$\$				
Farm/RanchUSEF Farm ID#										AHA Resolution 9-90 @ per horse\$				
Current Address Phone										AHA Recording Fee @ per horse\$				
City ST Zip										Box Stalls\$				
SitySiΣή Email										No initial bedding Tack Stall \$				
TRAINER INFORMATION (Must be filled out, if there is no trainer, the person responsible for the horse at the show)										Fack Stall \$\$\$				
Name										Member/Single Event Fees:				
AHA#USEF/EC#										AHA Single Event Fee @\$				
	Address Phone									USEF Show Pass @\$				
										Other Fees			¢	
Email													T	
RIDER A				nar classas					<del></del>	Misc\$				
	lationship of rider to owner for owner classes           IA#USEF/EC#USDF#									TOTAL FEES DUE\$				
City								Zip						
RIDER B										O.CC				
Relationship of rider to owner for owner classes										Office use				
AHA#USEF/EC#USDF#										Check or CC auth Total				
	STZip STZip								Due/Refund Post Mark Date					
RIDER C									<del></del>	FUSI Mark I	Jale			
•		er to ow	ner for own	ner classes					<del></del>			ntry form acknowled		
				_USEF/EC#						has read the front and reverse of this Entry Form and agrees to the applicable terms, conditions, waivers ALL OWNERS. TRAINERS. RIDERS. DRIVERS & HANDLERS				
										MUST SIGN	ON THE BAC	<ul> <li>K. Minor entrants m</li> </ul>	nust also have	
	ddress        Phone           ty        Zip										parent/guardian signature(s) on the back., releases, indemnification and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her			
ADDITION	NAL INF	ORMA	<b>ΓΙΟΝ</b> C	amper Plate#_		Camper	make			knowledge.	no miorinau011	is accurate to the Di	03t 01 1113/11 <b>0</b> 1	
Send Ackr	nowledge	ement to	Owner _		Tra	ainer	Bot	h						
Email Ack	nowledge	ement to	(Print)											
Stable with														