

LOGO if desired

Show Name
Date Location
Closing Date

CLOSING
SEND ENTRIES TO

Horse's Name		Reg. No.		DOB MM/DD/YY	Sex	Color	Sweepstakes Yes No
Sire		Dam		Horse USEF ID#		Horse USDF ID#	
Rider 1	Classes						TOTAL FEES
	Entry Fees						\$
Name		DOB MM/DD/YY	Amateur Certificate Yes No	Rider's Relationship to horse owner(s) for owner classes			
AHA#	USEF/EC#	USDF#		US Citizen: Yes No			
Address		City	State	Zip			

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Each person signing this entry form acknowledges that he/she has read the front and reverse of this Entry Form and agrees to the applicable terms, conditions, waivers

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Minor entrants must also have 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 knowledge.

THE FOLLOWING MUST BE SENT WITH YOUR ENTRIES
Photo copies of AHA, USEF/EC, Membership cards for each Rider/Driver/Handler/ Trainer/Owner, Horses Registration papers & Purchase contract if applicable.

OWNER INFORMATION Owner name as it appears on registration papers/purchase contract

Name _____
 If Joint owner check one: Non Related Co Owner Related – What is the Relationship? _____
 AHA# _____ USEF/EC# _____ USDF# _____
 Farm/Ranch _____ USEF Farm ID# _____
 Current Address _____ Phone _____
 City _____ ST _____ Zip _____
 Email _____

TRAINER INFORMATION (must be filled out, if there is no trainer, the person responsible for the horse at the show)

Name _____
 AHA# _____ USEF/EC# _____
 Address _____ Phone _____
 City _____ ST _____ Zip _____
 Email _____

ADDITIONAL INFORMATION Camper Plate # _____ Camper make _____

Send Acknowledgement to Owner _____ Trainer _____ Both _____
 Email Acknowledgement to (Print) _____
 Stable with _____

Total Entry Fees----- \$ _____
 _____ Office Fee (per horse) @ ----- \$ _____
 _____ USEF Fee @ \$23.00----- \$ _____
 (15. Drug, 8. Admin)
 _____ AHA Resolution 9-90 per horse @ ----- \$ _____
 _____ AHA Recording Fee per horse @ ----- \$ _____
 _____ Box Stalls @ \$ ----- \$ _____
 No initial bedding
 _____ Tack Stalls @ \$ ----- \$ _____
 _____ Misc ----- \$ _____

Member/Single Event Fees:
 _____ AHA Single Event Fee @ \$35 per person \$ _____
 _____ USEF Show Pass @ \$45 per person ----- \$ _____

Other Fees
 _____ Misc ----- \$ _____
 _____ Misc ----- \$ _____
 _____ Misc ----- \$ _____
 _____ Misc ----- \$ _____

TOTAL FEES DUE ----- \$ _____

Office use
 Check or CC auth _____
 Total _____
 Due/Refund _____
 Post Mark Date _____

ALL ENTRY FORMS MUST BE PROPERLY SIGNED BACK SIDE