

# Northeast Championship Show Entry Form

(SPB horses not eligible)

Back #

NAME OF HORSE: \_\_\_\_\_

Date: \_\_\_\_\_

Registration # \_\_\_\_\_ Year Foaled: \_\_\_\_\_ (Circle One) STALLION MARE GELDING

Owner Name: \_\_\_\_\_ Owner APHA # \_\_\_\_\_ Street Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone#: \_\_\_\_\_ Email: \_\_\_\_\_

Use a second form if more than two exhibitors on the same horse

EXHIBITOR #1	
Name: _____	
City/State: _____	
APHA # _____ Exp: _____	
DOB: ___/___/___ Age as of 1/1/18 _____	
<b>Type Membership: (Circle One):</b>	
Open Youth	Am. Nov. Am. Nov. Youth
Am. W/T Youth W/T	
Relationship: _____	
	10. NE Champ. Amateur Mares
	24. NE Champ. Amateur Geldings
	36. NE Champ. Color
	42. NE Champ. Amateur W/T SMS
	47. NE Champ. Amateur SMS
	62. NE Champ. Amateur HUS
	71. NE Champ. Youth HUS
	106. NE Champ. Nov Am Ranch Pleas
	112. NE Champ. Open Ranch Riding
	138. NE Champ. Youth Trail
	145. NE Champ. Trail All Ages
	157. NE Champ. W/T Western Pleasure
	163. NE Champ. West Pleas All Ages
	174. NE Champ. Youth Horsemanship
	184. NE Champ. Am Horsemanship

EXHIBITOR #2	
Name: _____	
City/State: _____	
APHA # _____ Exp: _____	
DOB: ___/___/___ Age as of 1/1/18 _____	
<b>Type Membership: (Circle One):</b>	
Open Youth	Am. Nov. Am. Nov. Youth
Am. W/T W/T	
Relationship: _____	
	10. NE Champ. Amateur Mares
	24. NE Champ. Amateur Geldings
	36. NE Champ. Color
	42. NE Champ. Amateur W/T SMS
	47. NE Champ. Amateur SMS
	62. NE Champ. Amateur HUS
	71. NE Champ. Youth HUS
	106. NE Champ. Nov Am Ranch Pleas
	112. NE Champ. Open Ranch Riding
	138. NE Champ. Youth Trail
	145. NE Champ. Trail All Ages
	157. NE Champ. W/T Western Pleasure
	163. NE Champ. West Pleas All Ages
	174. NE Champ. Youth Horsemanship
	184. NE Champ. Am Horsemanship

_____ # of classes x \$20 = _____	
Office Fee	= <u>20.00</u>
<b>Stall Fees</b>	
• Permanent _____ x \$75 = _____	
• Portable _____ x \$95 = _____	
<b>Camper Fee</b>	
• Weekend _____ x \$75 = _____	
• Night _____ x \$40 = _____	
Off Trailer Fee (per day) \$20 = _____	
Program _____ x \$1.00 = _____	
Back # _____ x \$1.00 = _____	
Day Fee _____ x \$250 = _____	
<b>Total:</b>	\$ _____

In accepting my entry, I hereby release the sponsor, their officers, members and co-sponsors at this show from any claim or right of damages, which may occur to me or my horse. I also assume and accept full responsibility for any damages done by me or my horse at this show.

Owner/Exhibitor Signature (required): \_\_\_\_\_

Office Use: Coggins: \_\_\_\_\_ Rabies: \_\_\_\_\_ Reg. Papers \_\_\_\_\_ APHA Cards \_\_\_\_\_