



REGION V AHA CHAMPIONSHIP HORSE SHOW

Evergreen Equestrian Park – Monroe, Washington

July 15 – 19, 2008

SEND TO:

Nancy Goertzen

32968 Road 132

Visalia, CA 93292

goertzenarab@surfside.net

PLEASE TYPE OR PRINT – ONLY ONE OWNER PER ENTRY FORM PLEASE All entries must be complete. Enclose copies of horse registration papers (both sides) USEF and AHA membership cards for each rider, driver, handler, trainer and owner; amateur certification and contract of sale if applicable, and correct fees.

Name of First Horse		Reg No	Age	Sex	Color	Height	Entry Fees
Sire		Dam			Horse USEF#		
Rider/Driver/Handler	AHA #	Class Numbers					\$
	USEF #						
Rider/Driver/Handler	AHA #	Class Numbers					\$
	USEF #						

FOR MORE THAN TWO RIDERS WITH SAME HORSE, USE NEXT TABLE, LEAVING HORSE DATA BLANK

Name of Second Horse		Reg No	Age	Sex	Color	Height	Entry Fees
Sire		Dam			Horse USEF#		
Rider/Driver/Handler	AHA #	Class Numbers					\$
	USEF #						
Rider/Driver/Handler	AHA #	Class Numbers					\$
	USEF #						

FOR MORE THAN TWO RIDERS WITH SAME HORSE, USE NEXT TABLE, LEAVING HORSE DATA BLANK

Name of Third Horse		Reg No	Age	Sex	Color	Height	Entry Fees
Sire		Dam			Horse USEF#		
Rider/Driver/Handler	AHA #	Class Numbers					\$
	USEF #						
Rider/Driver/Handler	AHA #	Class Numbers					\$
	USEF #						

FOR MORE THAN THREE HORSES, REQUEST ADDITIONAL FORMS OR MAKE PHOTOCOPIES

Each person signing this entry form acknowledges that he/she has read the front AND REVERSE SIDE of this entry form and agrees to the applicable terms, conditions, waivers and consent as set forth herein. Each Person agrees that the information is accurate to the best of his/her knowledge.

OWNER (as appears on registration papers or contract)

Address _____
 City, state, zip _____
 E-Mail: _____
 Amateur Owner Relationship to Horse Owner _____

AHA# _____
 USEF# _____
 Phone: _____
 Soc Sec/TID# _____

AAOTR AGE as of 12/01/07

TRAINER

Address _____
 City, state, zip _____

AHA# _____
 USEF# _____
 Phone: _____

STABLE WITH

(Request for joint stabling must arrive in the same envelope)

Total Class Fees	\$
Stalls/Tack Rooms @ \$135	\$
Shavings/Removal \$25 (per horse)	\$
Office Fee @ \$15 per horse (Includes 1 program per owner)	\$
USEF Drug Fee @ \$12 per horse (\$7 Drug; \$5 Administration)	\$
USEF Non-member Fee @ \$20 Per Person	\$
USEF Arabian Discipline Fee \$5 (Per Person. Junior Exhibitors are exempt)	\$
USEF Affidavit Fee @ \$5 (For members not in possession of cards)	\$
AHA Resolution 9-90 Fee @ \$15/horse	\$
Incomplete Entry Fee @ \$10	\$
Post Entry Fees	\$
ENCLOSED TOTAL FEES:	\$
payable to: REGION V AHA	
For office use only Amount Paid \$ _____ Horse No. _____	

Reg Class #	Show name & Date (mo/da/yr)	Placing	# Shown
	Qualifying Class Name	Rider/Handler	
Reg Class #	Show name & Date (mo/da/yr)	Placing	# Shown
	Qualifying Class Name	Rider/Handler	
Reg Class #	Show name & Date (mo/da/yr)	Placing	# Shown
	Qualifying Class Name	Rider/Handler	
Reg Class #	Show name & Date (mo/da/yr)	Placing	# Shown
	Qualifying Class Name	Rider/Handler	

ENTRIES CLOSE JUNE 11
(IF QUALIFIED BEFORE JUNE 10)

