

# ESQHA "Spring Into Summer" AQHA Entry Form

## HORSE INFORMATION

Registration Number: \_\_\_\_\_ Horse's Name: \_\_\_\_\_ Foal Year: \_\_\_\_\_ Sex: M S G  
 Owner's Name: \_\_\_\_\_ Holds ROM in: Open Amat Youth  
 Trainer/Stable: \_\_\_\_\_ Electric Hookup Arrival Date: \_\_\_\_\_ Leave Date: \_\_\_\_\_  
 Person/Entity Responsible for Payment: \_\_\_\_\_ Phone Number: (\_\_\_\_) \_\_\_\_\_  
 Full address of responsible person: \_\_\_\_\_ Email: \_\_\_\_\_

## EXHIBITOR(S) INFORMATION

**Exhibitor #1:**  
 Name: \_\_\_\_\_  
 AQHA #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship to horse's owner: \_\_\_\_\_  
 Division(s): Open Nov Am Yo SmallFry  
 Youth/Amateur, Date of Birth: / /

**Exhibitor #2:**  
 Name: \_\_\_\_\_  
 AQHA #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Relationship to horse's owner: \_\_\_\_\_  
 Division(s): Open Nov Am Yo SmallFry  
 Youth/Amateur, Date of Birth: / /

**TOTALS** (filled out by show secretary)  
 Office Charges: \_\_\_\_\_  
 Entry Fees/Flat Fee: \_\_\_\_\_  
 Trail/Fence Fees: \_\_\_\_\_  
 Stall/Grounds Fees: \_\_\_\_\_  
 Tack Stall: \_\_\_\_\_  
 Electrical Hookup: \_\_\_\_\_  
 Shavings: \_\_\_\_\_  
 Memberships: \_\_\_\_\_  
 AQHA Drug Fee: \_\_\_\_\_  
 Other: \_\_\_\_\_

Class #	Class Description	TH/FR	SA/SU	Fee	Class #	Class Description	TH/FR	SA/SU	Fee

**TOTAL:**  
 Payment. Type: \_\_\_\_\_ Amt: \_\_\_\_\_  
 Payment. Type: \_\_\_\_\_ Amt: \_\_\_\_\_  
 Payment. Type: \_\_\_\_\_ Amt: \_\_\_\_\_  
 I exhibit the above horse according to AQHA rules. By signing below, I release ESQHA from any claim to myself, stall, horse and equipment. I acknowledge voluntary participation, fully aware that horse sports involve inherent dangerous risk and assume any and all risk for injury and or loss.  
 Sign: \_\_\_\_\_  
 Date: \_\_\_\_\_