ESQHA "The Sizzler" 2025	Sizzler" 2025				HC	HORSE/EXHIBITOR #_	
Owner's Name:		Horse's Registration #:	tration #:				
Street Address:		Horse's Name					
City, State & Zip:		Year Foaled				Sex: M S G	
Telephone #: ()		Holds ROM In: Open	ı: Open	Amateur	Youth		
Owner's AQHA ID #: Expiration Date:							
Exhibitor(s) Information:							
Exhibitor #1:	Exhibitor #2:					Totals:	
Name:	Name:					Office Charges:	
Address:	Address:					Entry Fees:	
Telephone #:	Telephone #:					Stall Fee:	
AQHA ID #: Exp. Date:	AQHA ID #:	Exp.	8.52			AQHA Fee:	
Division(s): Open Rookie Novice Amateur Youth Small Fry	Division(s): Open	Rookie Novice	ce Amateur Youth		Small Fry	Trail Fee:	
Youth/Amateur Date Of Birth:	Youth/Amateur Date Of Birth:	ate Of Birth:				Camper:	
Class# Thu Fri Sat Sun Fee	Class#	Thu Fri	Sat	Sun	Fee	Shavings:	
						Memberships:	
						Other:	
						Balance From Back Side:	**
						Check #:	/ Cash / CC
Please note the following:							

- * You must show current AQHA membership card as applicable or purchase a new one at the show.

 * \$30.00 fee added on bounced checks. Accounts not paid will be reported to AQHA as applicable.
- * All accounts must be settled in full by the end of the show on Sunday, August 10, 2025.
- * 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.

Please Send Entry Forms & Payment to: ESQHA - Mailed: ESQHA, P.O. Box 294, Waverly, NY 14892: (607) 857-0444 / esqha1962@gmail.com

Signed:

				ESQH	A "The	ESQHA "The Sizzler" 2024	24			돈)RSE/E)	HORSE/EXHIBITOR #
Exhibitor #3:	<u>ن</u>					Exhibitor #4:	4:					Balance Forwarded:
Name:						Name:						
Address:						Address:						
Telephone #:						Telephone #:						
AQHA ID #:				Exp. Date:	ate:	AQHA ID #:		Exp.	Exp. Date:			
Division(s): Open)pen Rookie	tie Novice	Amateur	Youth	Small Fry	Division(s): Open	pen Rookie Novice		Amateur Youth	h Small Fry		
Youth/Amateur Date Of Birth:	ur Date Of I	Birth:				Youth/Amate	Youth/Amateur Date Of Birth:	h:				
Class#	Thu	Fri	Sat	Sun	Fee	Class#	Thu	Fri	Sat	Sun	Fee	
Please note the following:	he following	Η.										

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Signed: