

Name of Horse		Horse AQHA Registration #		Horse NSBA ID#		Sex –Circle One	Year Foaled				
						G M S					
Horse Owner:		Owner AQHA ID #		Owner Phone:							
				Exhibitor Email:							
OWNER NSBA ID#		Horse AQHA Show leased – Yes No		Verified: ☐		Must show AQHA Lease before showing					
		ROM: Y N									
EXHIBITOR #1		NSBA #		Circle one: OPEN		AMATEUR		YOUTH		Walk/Trot	
Name of Exhibitor:		DOB		AQHA #		List Classes #’s in boxes		Expiration Date		Relationship	
Street Address:		Phone #:									
City:		State:		Zip:							
EXHIBITOR #2		NSBA #		Circle one: OPEN		AMATEUR		YOUTH		Walk/Trot	
Name of Exhibitor:		DOB		AQHA #		List Classes #’s in boxes		Expiration Date		Relationship	
Street Address:		Phone #:									
City:		State:		Zip:							
EXHIBITOR #3		NSBA #		Circle one: OPEN		AMATEUR		YOUTH		Walk/Trot	
Name of Exhibitor:		DOB		AQHA #		List Classes #’s in boxes		Expiration Date		Relationship	
Street Address:		Phone #:									
City:		State:		Zip:							
TRAINER/STALLED WITH –											
Checks Payable to: ESQHA											
Return check fee \$50											

I hereby enter at my own risk and agree to abide by all the rules of the AQHA affiliate Horse Show. I further agree to indemnify the AQHA affiliate, Board of directors, members, employees, show management and owners of the property upon which the show is held against all claims, demands or suits and expenses arising out of any injury to any person or damage to any property caused by or to my horse(s), attendants or myself. Presentation of a signed entry form shall be deemed acceptance of these rules in the event of failure to sign the entry form, the first entry into the show ring shall be deemed as acceptance of said rules. I will exhibit the above horse according to AQHA rules; I assume responsibility for fine from AQHA due to errors on the Entry, and in exhibiting this horse.

SIGNATURE BELOW INDICATES THAT THE SIGNER HAS READ AND UNDERSTANDS ALL OF THE ABOVE:

Owner, Agent or Parents Signature: _____ Date: _____