

236 Battle Street, Webster NH 03303 – ESQHAFallShow@aol.com 603-731-9307 PLEASE SCAN & Email or mail DO NOT SEND TO FACEBOOK

ONLY ONE HORSE TO EACH ENTRY FORM – MUST BE ACCOMPANIED BY Copy of REGISTRATTION PAPERS, CURRENT MEMBERSHIP CARD to receive your back #

Name of Horse		Horse AQHA Registration #		Horse NSBA ID#		Sex –Circle One G M S		Year Foaled	
Horse Owner:		Owner AQHA ID #		Owner Phone:		Exhibitor Email:			
OWNER NSBA ID#				Horse AQHA Show leased – Yes No		Must show AQHA Lease before showing			
				ROM: Y N		Verified: ☐			

EXHIBITOR #1		NSBA #		Circle one:		OPEN		AMATEUR		YOUTH		Walk/Trot	
Name of Exhibitor:				DOB		AQHA #		Expiration Date		Relationship			
Street Address:				Phone #:		List Classes #’s in boxes							
City:				State:		Zip:							

EXHIBITOR #2		NSBA #		Circle one:		OPEN		AMATEUR		YOUTH		Walk/Trot	
Name of Exhibitor:				DOB		AQHA #		Expiration Date		Relationship			
Street Address:				Phone #:		List Classes #’s in boxes							
City:				State:		Zip:							

EXHIBITOR #3		NSBA #		Circle one:		OPEN		AMATEUR		YOUTH		Walk/Trot	
Name of Exhibitor:				DOB		AQHA #		Expiration Date		Relationship			
Street Address:				Phone #:		List Classes #’s in boxes							
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 INDICATEDS THAT THE SIGNER HAS READ AND UNDERSTANDS ALL OF THE ABOVE:

Owner, Agent or Parents Signature: _____ Date: _____

Class Fees/Judge:

All Classes: \$15/Judge
 NSBA Classes: \$10/Judge
 All Breed Classes: \$20/Class w/50% payback
 Leadline/EWD Class Free

FLAT FEE: Includes all AQHA ENTRY FEES
Please see information on show bill
(Includes all AQHA classes, all divisions)

Office Fee \$15/Judge: _____
 AQHA Admin Fee \$10/Judge: _____

Stall: \$155 (\$180 after 9/1)
Weekend Only: \$105 (\$123 after 9/2)
(NO SPLITTING OF STALLS must be on 1 bill)

Haul In: \$50/horse/day _____

Shavings – _____ x TBA/bag _____

Camper: \$50/night YES OR NO
 Obstacle ____\$25/circuit____

TOTAL - _____

CASH or Check # _____, Credit Card 4% service fee
CHECK OR CC MUST BE ATTACHED TO FORM