

Complete this form in its entirety for each horse exhibited

Horse Name _____

Registration Number _____

(circle one) Stallion Gelding Mare Foal Year _____

Horse Owner's Name _____

Owner's Registration Number _____

BACK NUMBER

to be provided by show secretary

Youth Name _____

AQHYA Number _____ Exp _____

Amateur Name _____

AQHA Number _____ Exp _____

Open Exhib Name _____

AQHA Number _____ Exp _____

Tab Name: _____

Cellphone _____
In case of emergency

Youth Birthdate: _____

Horse Owner is _____ to exhibitor
relationship

Amateur Birthdate: _____

Horse Owner is _____ to exhibitor
relationship

CLASS NUMBER / NAME	EXHIBITOR	FRI	SAT	SAT	SUN	SUN	Sp Event

CONTACT INFORMATION - **REQUIRED!!**

Name _____ Address _____

Phone _____ City/State/Zip _____

I agree to exhibit this horse, subject to AQHA rules and release the show from any claim or loss to myself, horses employees or equipment. Under law, an equine activity or equine sponsor is not liable for an injury or the death of a participant in equine activities resulting from the inherent risk of equine activities.

Signature of Person Responsible _____ Date _____

If a minor, signature of parent or guardian