

ENTRY FORM



<input type="checkbox"/> OPEN Ck#:	<input type="checkbox"/> Credit Card on File	Back #: FOR OFFICE USE ONLY
<input type="checkbox"/> CASH		

Responsible Party: (Person paying the Tab) Stalled With or Trainer:

HORSE INFORMATION (As it appears on Registration Papers)

Registered Name: Reg. #: Foal Year: Sex: M G S

OWNER INFORMATION (As it appears on Registration Papers)

Owner: AQHA # Exp. Date: NSBA# Exp. Date:
 Address: PCQHA# Exp. Date:
 City, St, Zip: Email: Phone: SSN:

EXHIBITOR INFORMATION (Date of Birth "DOB" required for Youth, Amateur & Select exhibitors only)

EXHIBITOR # 1 Name: DOB: Rider Status: Level 1
 Open Amt.
 Youth Select
 AQHA # Exp. Date: NSBA# Exp. Date: PCQHA# Exp. Date:
 Address: City, St, Zip:
 Phone: Email: SSN:

EXHIBITOR # 2 Name: DOB: Rider Status: Level 1
 Open Amt.
 Youth Select
 AQHA # Exp. Date: NSBA# Exp. Date: PCQHA# Exp. Date:
 Address: City, St, Zip:
 Phone: Email: SSN:

EXHIBITOR # 3 Name: DOB: Rider Status: Level 1
 Open Amt.
 Youth Select
 AQHA # Exp. Date: NSBA# Exp. Date: PCQHA# Exp. Date:
 Address: City, St, Zip:
 Phone: Email: SSN:

Exh #	Class #	Class Name:	Exh #	Class #	Class Name:
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ENTRIES CONTINUED FROM PAGE 1:

Exh #	Class #	Class Name:	Exh #	Class #	Class Name:

DISCLAIMER OF LIABILITY AND AGREEMENT

We do not accept any liability for any accident, loss, damage, injury or illness to any riders, horses, owners, spectators, property, vehicles and their contents and accessories or any other person or property whatsoever, whether caused by their negligence, breach of contract or in any other way whatsoever. Horses are entered at your own risk and are subject to AQHA rules. In case of death, accident, injury or theft, to the exhibitor, their friends & family, horses, property, etc., no claims will be honored against Pacific Coast Quarter Horse Association, California Quarter Horse Association, Show Management or Staff and all those associated with this show.

Participant Signature:

Parent or Legal Guardian for minor exhibitors, must be 18 to sign.

Date:



Please make checks payable to:

CQHA

PRE-ENTRY DEADLINE: SEPT. 15, 2019 (Entries must be received by this date)
DO NOT SEND ENTRY MONEY NOW, PAY AT SHOW UPON CHECK-IN!

SEND COMPLETED ENTRY FORM, COPY OF HORSE PAPERS & EXHIBITOR CARDS TO:

MAIL: DAUANE ELKINS
 FALL CLASSIC
 5398 ASPEN AVE
 ERIE, CO 80516

EMAIL: DAUANE.ELKINS@GMAIL.COM

For more information visit the website:
www.pcqhafallclassic.com

or contact ...

DAUANE ELKINS
 303-941-3496