Is this horse Solid Paint Bred?

Yes or No

GSPHC APHA Classes

Name of Show: _____

Back #

Show Dates: _____

NAME OF HORSE: _____

Registration # _____ **Year Foaled:** _____ **(Circle One)** **STALLION** **MARE** **GELDING**

Owner Name: _____ **Owner APHA #** _____ **Street Address:** _____ **City:** _____

State: _____ **Zip:** _____ **Phone#:** _____ **Email:** _____

NJ Bred _____ Y/N

Use a second form if more than three exhibitors on the same horse.

EXHIBITOR #1

Name: _____
City/State: _____
Phone Number: _____
APHA # _____ Exp: _____
DOB: ___/____/_____
Type Membership: (Circle One):
Open Am. Nov. Am. Am. W/T
Youth Nov. Youth Youth W/T
Relationship: _____

EXHIBITOR #2

Name: _____
City/State: _____
Phone Number: _____
APHA # _____ Exp: _____
DOB: ___/____/_____
Type Membership: (Circle One):
Open Am. Nov. Am. Am. W/T
Youth Nov. Youth Youth W/T
Relationship: _____

EXHIBITOR #3

Name: _____
City/State: _____
Phone Number: _____
APHA # _____ Exp: _____
DOB: ___/____/_____
Type Membership: (Circle One):
Open Am. Nov. Am. Am. W/T
Youth Nov. Youth Youth W/T
Relationship: _____

Class #	Class Name:

Class #	Class Name:

Class #	Class Name:

In accepting my entry, I hereby release the sponsor, their officers, members, and co-sponsors at this show from any claim or right of damages, which may occur to me or my horse. I also assume and accept full responsibility for any damages done by me or my horse at this show.

Owner/Exhibitor Signature (required): _____

Fees will be calculated by show entry software and reviewed with payee prior to payment. See class list with fee schedule for complete list of class, stall, point, and miscellaneous fees.