

Is this horse Solid Paint Bred?

Yes or No

Garden State Paint Youth Club APHA Show *APHA CLASSES ONLY*

Back #

Date: _____

NAME OF HORSE: _____

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

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

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

EXHIBITOR #1

Name: _____

City/State: _____

APHA # _____ Exp: _____

DOB: ___/___/___ Age as of 1/1/2020 _____

Type Membership: (Circle One):

Open Am. Nov. Am. Am. W/T
Youth Nov. Youth Youth W/T

Relationship: _____

EXHIBITOR #2

Name: _____

City/State: _____

APHA # _____ Exp: _____

DOB: ___/___/___ Age as of 1/1/2020 _____

Type Membership: (Circle One):

Open Am. Nov. Am. Am. W/T
Youth Nov. Youth W/T

Relationship: _____

Class #	Class Name:

Class #	Class Name:

Show Fees

Youth WT
#Classes _____ x \$12= _____
Dayfee _____ = \$56

Novice Youth
#Classes _____ x \$12= _____
Dayfee _____ = \$56

Novice Amateur
#Classes _____ x \$16= _____
Dayfee _____ = \$70

Youth
#Classes _____ x \$12= _____
Dayfee _____ = \$56

Amateur
#Classes _____ x \$16= _____
Dayfee _____ = \$70

Amateur WT
#Classes _____ x \$16= _____
Dayfee _____ = \$70

Entry Fee Total _____
 APHA Head fee _____ \$10.00
 Office Fee _____ \$6.00
 Stall Fee _____ x \$75 = _____
 Camper Fee _____ x \$75 = _____
 Shavings _____ x \$7 = _____
 Off Trailer Fee _____ x \$15 = _____

Show Total \$ _____

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): _____

Office Use: Coggins: _____ Rabies: _____ Reg. Papers _____ APHA Cards _____