BACK #

PtHA MASTER ENTRY FORM

DAY SHOWN
Sat. Sun. Other

NOTE: Only one Horse/Exhibitor/Youth/Amateur per form
INCOMPETE ENTRY FORMS MAY RESULT IN LOSS OF PtHA POINTS

Name of Show_____ Date of Show_____
Owner PtHA Memb.# Owner Name
OR Lease ID# _____ **OR** Lessee _____Phone(_____)_____

Address_____City_____State_____Zip_____

Owner/Agent Signature_____
**IMPORTANT NOTE: Entry in this show constitutes an agreement that neither the sponsoring charter/club nor the Pinto Horse Association of America, Inc. will be held responsible for any loss, theft, or injury occurring at this show.

Horse Name_____Registration #_____Foaling Date_____

CIRCLE ONE IN EACH BOX:

Horse Pony Miniature	Mare Stallion Gelding	Overo Tobiano	Stock Hunter Pleasure Saddle

**********SEE SHOWBILL FOR CLASS NUMBERS TO FILL OUT INFORMATION BELOW**********

ONLY ONE (1) AMATEUR OR YOUTH MAY USE THIS FORM

AMATEUR

AM Exhibitor Name_____PtHA#_____
Address_____City_____State_____Zip_____
Relationship to owner_____Date of birth_____E-Mail address_____

Amateur Class #														
Amateur Class #														
Novice Class #														
Scratched class #														

YOUTH

YA Exhibitor Name_____PtHA#_____
Address_____City_____State_____Zip_____
Relationship to Owner_____Date of birth _____E-Mail address_____

Youth Class #														
Youth Class #														
Scratched Class #														

OPEN

Open Exhibitor's Name_____ E-Mail address_____
Address_____City_____State_____Zip_____

Open Class #														
Open Class #														
Scratched Class #														

By the act of entering this show, Owners, Lessees and Exhibitors agree that PtHA, Tri State Pinto, the show grounds and the show committee will not be held responsible for any loss, injury, damage, or debts in connections with this show.

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Signature of Owners or Exhibitor/Rider/Agent - Must be an Adult