

2018 NWVQHA SHOW SERIES

Show Date: _____

PAYEE NAME						BACK NO.					
ADDRESS											
CITY, STATE, ZIP CODE											
SIGNATURE						PHONE #					
HORSE NAME		AQHA HORSE REG#		ROM		YEAR FOALED		STALLION			
				Open Youth Amateur				MARE			
								GELDING			
OWNER NAME						CITY, STATE					
# 1	YOUTH EXHIBITOR	NOV	NON-PRO	Birthdate	RELATION TO OWNER						
CLASSES (One class number per block please)											
NAME:											
AQHA ID#:											
EXP DATE:											
# 2	AMATEUR EXHIBITOR	NOV	NON-PRO	Birthdate	RELATION TO OWNER						
CLASSES (One class number per block please)											
NAME:											
AQHA ID#:											
EXP DATE:											
# 3	OPEN EXHIBITOR				RELATION TO OWNER						
CLASSES (One class number per block please)											
NAME:											
AQHA ID#:											
EXP DATE:											
TRAINER'S NAME:						# STALL(S)					
_____						_____					
						# SHAVINGS \$7.00					
HOOK-UP/PLUG IN(\$60 for 2 day & 100 for 4 day) Thurs Fri Sat Sun Mon											
						GROUNDS FEE(no stall)					

Thank you for coming to our show!

