2019 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!

NWVQHA