

Horse Information:

Registered Name: _____ **NRHA #:** _____ **Sex:** M G S **Year Foaled:** _____
Sire: _____ **Dam:** _____ **Trainer:** _____

Ownership Information:

Registered Owner: _____ **NRHA #:** _____ **Exp:** _____
Co-Owner: _____ **NRHA #:** _____ **Exp:** _____

Address: _____

Phone: _____ **Email:** _____

EMERGENCY Contact:

Name: _____ **Phone:** _____

Exhibitor Information:

Rider #1	Exp	PRO	NP	YTH	Exp	PRO	NP	YTH	Entry Fees:	\$
NRHA #					NRHA #				Total Due:	\$

Class Numbers:						Class Numbers:						Mares			
												100	1 Schooling Run \$10.00		
												200	2 Schooling Runs \$20.00		
												300	3 Schooling Runs \$30.00		
Class Numbers:						Class Numbers:						Not Mares			
												400	1 Schooling Run \$10.00		
												500	2 Schooling Runs \$20.00		
												600	3 Schooling Runs \$30.00		
Class Numbers:						Class Numbers:						Open			
												700	1 Schooling Run \$10.00		
												800	2 Schooling Runs \$20.00		
												900	3 Schooling Runs \$30.00		

Rider #3	Exp	PRO	NP	YTH	Show Contacts					
NRHA #					Gary Vickrey 970-261-9651 or Martha Grimes 970-379-3335 or Kelsey Rhyne 661-889-8059					

Class Numbers:						Please Send Earnings To:					
						Name or Bussiness:					
						SSN or EIN:					
						Address:					

By signing here I agree to the terms and conditions of this event and have carefully read and fully understand the release of liability and waiver of legal rights:

Signature and Date: _____