

# 2018 NCQHA Shows

Show Name \_\_\_\_\_

BACK #

Name of the person paying for this horse \_\_\_\_\_ Lamination Qty \_\_\_\_\_

## HORSE INFORMATION as it appears on Registration Papers/Competition License

*Complete one entry form for each horse being entered. Use this form to enter ALL CLASSES.*

Registered Name: \_\_\_\_\_ Registration #: \_\_\_\_\_ NSBA Eligibility #: \_\_\_\_\_ NRHA Comp. Lic #: \_\_\_\_\_

Sex: \_\_\_\_\_ Foal Yr: \_\_\_\_\_ Trainer \_\_\_\_\_

WILL THIS HORSE BE RENTING A STALL? \_\_\_\_\_

## OWNER INFORMATION as it appears on Registration Papers

Name	AQHA #	Exp Date	NSBA #	Exp Date	NRHA #	Exp Date	Phone #
Owner							

Address: \_\_\_\_\_ City, State, ZIP: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**EMERGENCY CONTACT** Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

## EXHIBITOR INFORMATION \*\*Date of Birth (DOB) required for Youth, Non Pro, Primetime Amateur & Select

Class #	Class #	Class #
<p><b>#1 NAME:</b> _____ DOB: _____</p> <p>AQHA #: _____ Exp: _____ Type _____</p> <p>NRHA #: _____ Exp: _____ Type _____</p> <p>NSBA #: _____ Exp: _____ Type _____</p> <p>Relationship to Owner: _____</p> <p>Address _____</p> <p>City _____ ST _____ ZIP _____</p>	<p><b>#2 NAME:</b> _____ DOB: _____</p> <p>AQHA #: _____ Exp: _____ Type _____</p> <p>NRHA #: _____ Exp: _____ Type _____</p> <p>NSBA #: _____ Exp: _____ Type _____</p> <p>Relationship to Owner: _____</p> <p>Address _____</p> <p>City _____ ST _____ ZIP _____</p>	<p><b>#3 NAME:</b> _____ DOB: _____</p> <p>AQHA #: _____ Exp: _____ Type _____</p> <p>NRHA #: _____ Exp: _____ Type _____</p> <p>NSBA #: _____ Exp: _____ Type _____</p> <p>Relationship to Owner: _____</p> <p>Address _____</p> <p>City _____ ST _____ ZIP _____</p>

RELEASE: WARNING: Under Colorado Law, an equine professional is not liable for injury to or death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to Section 13-21-119 Colorado Revised Statutes. I (we), the owner(s), exhibitor, hereby request to enter the show indicated and agree to abide by the bylaws, standing rules, judging and show rules of the respective organization, i.e. American Paint Horse Association (APHA), American Quarter Horse Association (AQHA), Northern Colorado Quarter Horse Association, National Snaffle Bit Association, Excel Associates, LLC, Zone 3 Paint Show and Western Stock Show Association. I (we), hereby release APHA, AQHA, Northern Colorado Quarter Horse Association, National Snaffle Bit Association, Excel Associates, LLC, Zone 3 Paint Show and WSSA and its members, employees, from any loss to myself, employees, agents, horses and/or equipment while attending and/or participating in this show. I further agree that my likeness or horse may be used in promotional materials for the show and Zone 3. By providing the email address of participants above, you agree that you would like to receive periodic emails about horse related items, activities or upcoming events. The provisions contained herein are hereby made a part of this entry agreement.

Signature/Date: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Confirmation email \_\_\_\_\_

★★★ Include a copy of owner(s) exhibitor(s) current cards and copy of the horse's registration papers & competition license (if applicable).

IF YOU SHOWED TO US LAST YEAR AND HAVE SAME HORSE / RIDER INFORMATION YOU DO NOT NEED TO SEND COPIES OF PAPERS UNLESS THERE ARE CHANGES. ★★★