

ENTRY FORM

BACK Number _____

Laminate Back Numbers? Set of 2 \$4; Additional Numbers @ \$3 each _____ Quantity _____

RESPONSIBLE INDIVIDUAL All information on this horse will be tracked by this individual and cannot be changed after initial data input.

First and Last Name _____ Phone _____ Trainer _____ Phone _____

Horse Name _____ APHA Registration # _____ SPB _____ Horse Sex _____ Year Foaled _____

Exact Owner Name _____ Email _____ Phone _____

Complete Mailing Address _____ City _____ State _____ Zip _____

APHA ID # _____ Exp _____ Membership Type _____ NSBA ID # _____ NSBA Exp _____ NSBA Membership Type _____

Exhibitor 1 Name _____ APHA ID # _____ Open Exp _____ Amateur/Youth Exp _____

Membership Type _____ NSBA ID # _____ NSBA Exp _____ NSBA Membership Type _____ DOB _____

Email _____ Phone _____ Complete Mailing Address _____

City _____ State _____ Zip _____ Relationship to Owner _____

Enter Class # separated by a comma _____

You will be entered into classes all days unless otherwise noted.

Exhibitor 2 Name _____ APHA ID # _____ Open Exp _____ Amateur/Youth Exp _____

Membership Type _____ NSBA ID # _____ NSBA Exp _____ NSBA Membership Type _____ DOB _____

Email _____ Phone _____ Complete Mailing Address _____

City _____ State _____ Zip _____ Relationship to Owner _____

Enter Class # separated by a comma _____

You will be entered into classes all days unless otherwise noted.

Note: _____

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

ADULT Owner/Exhibitor/Agent Signature _____ **Date:** _____

OFFICE USE

_____ Date of Birth X1 _____ X2 _____

_____ Horse Registration Certificate

_____ APHA Membership O _____ X1 _____ X2 _____