

Use this form to submitted classes for horses already entered  
(as in you needed more points to finish qualification )



## ADD A REGIONAL CLASS - LATE QUALIFICATIONS

do not use for a new entry

HORSE ENTRY INFORMATION - (one horse per form)		
Owner		Trainer
Registry	Registration#	Horse Registered Name

REGIONAL CLASSES ADDED (qualified after 5/8/2019)			
Class #	Class Name	Rider	#Points Needed

SHOW VERIFICATION INFORMATION					
Show Date & Name	Class Name	Score	Placing	# In Class	Points

**Qualification for Regional Classes** • Previous Regional Championships, Regional Reserve Championships or Top Five awards do not qualify you for Regional Championship classes. Qualifications are determined by the number of points a horse receives for classes shown. See the current AHA handbook for comprehensive rules. You can find qualification reports on the AHA website [Horse/Riders Points and Competition Records](#). Remember, when qualifying for an Amateur (AT) or Amateur Owner (AO) class, you cannot use points and/or a first or second place obtained by a professional. AT and AO qualification points and placings may be used toward an Open class. Horses previously qualified (1/1/2018 4/30/2019) and entered after closing date (05/08/2019) will pay post entry fees. **Points for qualification and entry closing purposes are as of the closing date of entries. Exhibitors are responsible for ascertaining their qualifications (AHA Art. 1201.4) Please make certain that you have enough qualification points for the classes you enter. Complete a Qualification Record Form for each horse entered.**

To pay by check, Make payable to <b>REGION 4 AHA</b> and send with entry form and copies.											
To make payment by Credit Card fill in below. A 3% Credit Card Transaction (minimum \$5) will be added to your entry blank total.											
<b>Credit Card Number</b> – please print legibly. Declined cards are subject to penalty											
<input type="checkbox"/> VISA <input type="checkbox"/> MASTER CARD <input type="checkbox"/> DISCOVER								Expiration Date xx/xxxx		Sec Code:	
Print Name (as it appears on card)								Phone			
Address								Amount:			
City, ST. Zip								3% Convenience Fee (\$5 min)			
E-Mail								<b>TOTAL CHARGE:</b>			
Cardholder Signature								Office use:			

