

**REGION 4 AHA**  
**Championship Horse Show**  
September 29 – October 3, 2020  
Oregon Horse Center – Eugene, Oregon

**Early Entries close: September 1**  
**[www.gaitkeeper.com](http://www.gaitkeeper.com)**

**PLEASE READ THE PRIZE LIST COMPLETELY**  
**MANY THINGS HAVE CHANGED IN 2020!**

**Definitions:**

OWNER: Name of Person(s) as it APPEARS on registration papers.

TRAINER: Person who has care and custody of horse.

RIDER: Exact names as it appears on AHA COMPETITION membership card.

HORSE: Exactly as it appears on Registration papers. Include "1A, 2A etc. on Half-Arabians.

BY ENTERING ONLINE, YOU AGREE to be bound by all applicable Rules and all terms and provisions of the entry blank and all terms and provisions of the Prize List as published at [www.region4aha.com](http://www.region4aha.com) fill out the entry blank by going through the tabs. Starting with the Owner/Trainer and proceeding to the next one. Make sure you click "save and continue" on each page. "SUBMIT ENTRY" button on the last tab to submit your entry online.

**Guidelines:**

1. Enter owner info, EXACTLY as it appears on the papers. If the horse has new owners, call AHA to get the papers updated. Enter your AHA# under Association. We do not need your USEF# or your SSN#
2. Enter Trainer info, EXACTLY as it appears on the AHA Card. If your horse is not in training, enter the OWNER name.
3. Enter rider info, EXACTLY how it appears on your AHA card. If it says "Josephine Jolene Smith" or "Timothy Michael White" do not put down JoJo Smith or Timmy White. Include middle initials if they are on your AHA card.
4. If you are recently married and your card has your maiden name, contact AHA for a name change. (*same goes for JoJo and Timmy*). What is on your AHA card is how it will be recorded and announced
5. Enter your horse information, EXACTLY as it appears on the papers. Use 1A, 2A etc for Half-Arabians.
6. Enter your horse DOB (date of birth) as xx/xx/xx as in 01/01/20
7. All classes have 3 digits. Class 1 is #001. Use the drop down menu to make it easier.
8. You can stop and start as many times as you need to, until you hit "SUBMIT".

**Entry Payment**

Write your check for the correct amount and mail payment check to:

REGION 4 AHA % Lisa Kolke. 16017 NE 319th St. Battle Ground, WA 98604

Sign and scan your **Entry Back**, USEF & OHC Covid waiver and email to: [lkolke@aol.com](mailto:lkolke@aol.com)

If you have any questions about the show, email Lisa Kolke at [lkolke@aol.com](mailto:lkolke@aol.com) or call 360.687.2256

**Please do not cut and paste data from other applications into these forms.**