

**SEND TO:**

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**2020 REGION 9 AHA CHAMPIONSHIP HORSE SHOW – Off*icial Entry For***

***Will Rogers Memorial Center, Ft. Worth, TX June 16-20, 2020 ENTRY DEADLINE: May 16, 2020***

**PLEASE TYPE OR PRINT: ONLY ONE HORSE PER ENTRY FORM.** All entries must be complete and include correct and complete fees payable by check (to REGION 9 AHA) or money order. Copies of each horse’s registration papers and purchase contracts (if applicable – not acceptable for AO classes) must be included. USEF/EC membership cards, amateur certification (if applicable), and AHA membership cards for each rider, driver, handler, trainer and owner must also be included. **FOR MORE THAN ONE HORSE, PLEASE MAKE PHOTOCOPIES. *Please print clearly.***

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***□ Please check here if adding classes for a horse already entered.*** | | | | | | | | | | | | | | | | | | | | | | | |
|  | Name of Horse | | | | | | | Reg. No | | | | DOB | | | | | Sex | Color | | Horse USEF # | | | |
| Sire | | | | | | | Dam | | | | | | | | | | Height | | Horse USDF # | | | Sweepstakes?  ***□*** Yes ***□*** No |
| Rider/Driver/Handler #1 | | AHA # Expires ***□*** Comp | | | | Classes Entered **(please use show’s class #’s, not AHA Codes)** | | | | | | | | | | | | | | | | Entry Fees | |
| USEF/EC# ***□*** Amateur | | | |  | | | |  | | |  | | |  | | |  | | | $ | |
| USDF (if applicable) | | | |  | | | |  | | |  | | |  | | |  | | |  | |
| Rider/Driver/Handler #2 | | AHA # Expires ***□*** Comp | | | | Classes Entered **(please use show’s class #’s, not AHA Codes)** | | | | | | | | | | | | | | | | Entry Fees | |
| USEF/EC# ***□*** Amateur | | | |  | | | |  | | |  | | |  | | |  | | | $ | |
| USDF (if applicable) | | | |  | | | |  | | |  | | |  | | |  | | |  | |
| Rider/Driver/Handler #3 | | AHA # Expires ***□*** Comp | | | | Classes Entered **(please use show’s class #’s, not AHA Codes)** | | | | | | | | | | | | | | | | Entry Fees | |
| USEF/EC# ***□*** Amateur | | | |  | | | |  | | |  | | |  | | |  | | | $ | |
| USDF (if applicable) | | | |  | | | |  | | |  | | |  | | |  | | |  | |
| Each person signing this entry form acknowledges that he/she has read the front and reverse of the Entry Form and agrees to applicable terms, conditions, waivers, releases, indemnification and consent as set forth herein. Each person agrees that the information is accurate to the best of his/her knowledge**. ALL OWNERS, TRAINERS, COACHES, RIDERS, DRIVERS & HANDLERS MUST SIGN ON THE BACK.** Minor entrants must also have parent/guardian signature on the back. | | | | | | | | | | | | | | | | | | | | | | | |
| **OWNER (as appears on reg. papers or contract)**  Name | | | | | | | | | | | AHA # ***□*** Comp Expire | | | | | | USEF/EC # ***□*** Amateur | | | | USDF# (if applicable) | | |
| Address | | | | | | | | | | | City, State, ZIP | | | | | | | | | | *(Required for Prize Money Payout)* Owner’s Soc. Sec or Tax ID # | | |
| Home Phone | | | Cell | | | | | | | | Email: **Please Print** | | | | | | | | | |
| **TRAINER (Mandatory, MUST BE 18 yrs. old or OLDER)**  Name | | | | | | | | | | | AHA # ***□*** Comp Expire | | | | | | USEF/EC # ***□*** Amateur | | | | USDF# (if applicable) | | |
| Address | | | | | | | | | | | City, State, ZIP | | | | | | | | | | | | |
| Phone | | | | Cell | | | | | | | Email: **Please Print** | | | | | | | | | | | | |
| **COACH (If Applicable, MUST BE 18 yrs. old or OLDER)**  Name | | | | | | | | | | | AHA # ***□*** Comp Expire | | | | | | USEF/EC # ***□*** Amateur | | | | USDF# (if applicable) | | |
| **AMATEUR/JUNIOR (A/J) EXHIBITOR:**  Amateur/Junior Name | | | | | A/J DOB | | A/J Age | | A/J Relationship to Horse Owner | | | | | A/J Address IF NOT THE HORSE OWNER | | | | | | | | | |
| **STALLING INFORMATION:**  ***ENTRIES WISH TO BE STABLE TOGETHER MUST BE SUBMITTED IN THE SAME ENVELOPE*** | | | | | Stall With | | | | | | | | | | Barn Preference | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | |
| **NO QUALIFICATION REQUIRED FOR 2020 REGION 9 CHAMPIONSHIP SHOW ONLY.**  **If paying by PayPal, exhibitors must attach a LEGIBLE PayPal receipt including DATE on or prior to May 16, 2020. If no date on PayPal receipt, it is subject to post entry.**  **Receipt #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_ Name of PayPal Payee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Name of Horse\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount:\_\_\_\_\_\_\_\_\_\_**  **All checks must be completed, no open checks.\, no postdated checks.** | | | | | | | | | | | | | | | | | | | | | | | |

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| **TOTAL CLASS ENTRY FEES (from left)** | | | | $ | |
| **STALL FEES** | | | | | |
|  | Horse Stalls @ $130 | | | $ | |
|  | Tack Stalls @ $130 | | | $ | |
|  | **NO EARLY ARRIVAL BEFORE JUNE 15 ,2020 @ 8:00 AM** | | | $ | |
| **MANDATORY FEES** | | | | | |
|  | Office Fee @ $27.00 per horse | | | $ 27 | |
|  | AHA Educational Fee  [Res 9-90] @ $15/horse | | | $ 15 | |
|  | AHA Reporting Fee  @ $5/horse | | | $ 5 | |
|  | AHA Recovery Fee @ $25 per horse **($00 for 2020 only)** | | | $ 0 | |
| **MISCELLANEOUS FEES** | | | | | |
|  | Post Entry Fee [If applicable, see Show Fees, [p 7 ,9, 23, 29] | | $ | | |
|  | Panel Removal, per panel: $30/$200,( see p. 7 & 31] | | $ | | |
|  | INCOMPLETE ENTRY FEE**:** ($25) [ see p. 7, 23, 24, 35) | | $ | | |
|  | If PayPal is used, PayPal Fee per horse ($15) | | $ | | |
| **CATTLE FEES**  **[in addition to class fees]** | | | | | |
|  | Working Cow Classes @ $75/horse/class **($00 for 2020 only)** | | | $ | |
| **USEF FEES** | | | | | |
|  | USEF Fee [Drug $15, Fed $8] @ horse | | | $ 23 | |
|  | USEF Show Pass Fee (Replaces non-Member Fee) @ $45 per person | | | $ | |
| **TOTAL ENCLOSED FEES** | | | | $ | |
| **THANK YOU FOR YOUR ENTRY** | | | | | |
| ***Entry Confirmation to be:***  ***□ mailed OR □ emailed***  ***to □ owner OR □ trainer***  ***Email address: (Please print)***  ***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*** | | | | | |
| **Office Use Only Post Mark:** | | | | | |
| **Check #****or PayPal** | | **Amount** | | |
| **Check # or PayPal** | | **Amount** | | |

## **ENTRY DEADLINE: May 16 ,2020**