

2018 NWAHSA Speed Exhibitor Entry Form

DATE:	BBR# if applicable	# E.I.A. VERIFIER			
Exhibitor Name _		AGE: As of Jan.31 of current year			
Mailing Address_					
Email	Phone #:				
Jackpot Classes \$30.00	NWAHSA Classes \$5.00	Indicate next to class number if you want your time to "ROLL" to a NWAHSA Class. If NOT indicated in ADVANCE you MUST run again, If indicated IN ADVANCE you MAY NOT rerun.			
		r its members are not responsible for any accident, injury, theft, or s show. I agree to abide by all rules that are posted within			

g NWAHSA bylaws.

Signature of exhibitor (or guardian if rider is under the age of 18)

\*\*\*\*\*I DO NOT give NWAHSA permission to use my photos or the photos of my children on Facebook, Websites, and/or for any advertisement purposes\_

Signature of exhibitor (or guardian if rider is under the age of 18)

	Class Number	Roll-Over TO		Entry Fee \$\$
Horse Name		Class Number	Draw # for jackpots	
<b></b>				
	Total Entry Fees		Subtotal	
Office Fee NW		HSA	\$5.00	\$5.00
NWAHSA				
ΝΙΛΛΛΗςΛ			Total	