Colorado POA Club Entry Form

Fill out a separate entry form for each pony/rider combination. Please print legibly.

Show Date:		Contestant Number: (If reusing back number from previous shows)			
Birthdate:/		(II TOUL	oning back namber	nom provious six	, , , , , , , , , , , , , , , , , , ,
Age Group on Jan.1 of Current Yr. (Circle):	Leadline 6&U 9	&U 10	D-13 14-18 19&	O	
Registered Name of Pony/Horse		Sex	Reg. Number	Yr. Foaled	Height
Name of Rider		Sex	Owner's Name		
Send early entries by 5 p.m. Thurs	BILL TO: Name				
before the show to: Emily Andrews	Address				
708 Diana St.	City, State, ZIP				
Fort Morgan, CO 80701	Phone				
contact@copoac.org	Email				
Questions? Call Peggy, 970-483-7491	Parent/Guardian				
	(Please Print)				
the inherent risks of equine activities, pursuant to se injury, or damage incurred to or by my children, my					-
CoPOAC, or POAC, Inc. We will abide by the POAC said rules. Entry must be signed below (parent, c	C, Inc. rules and CoPC	AC rules Id, owne	. The Show Committe	e will interpret and s	ettle any dispute of
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