



NEVADA QUARTER HORSE ASSOCIATION

Gambler's Choice

VRH AQHA

WSVRHA/NQHA approved

Cow Horse/ Cutting/ Ranch Riding/ Roping

July 31-August 1-2, 2020

Fairgrounds

ELKO, NEVADA

Back #
 Papers _____
 AQHA Card _____

HORSE INFORMATION As it appears AQHA Papers				PLEASE SEND COPY OF REGISTRATION PAPERS			
Name:		AQHA#		Year:		Sex: M G S ROM: Y N	
# of Horse Stalls:		#of Tack Stall:		#Shavings:		Trainer:	
OWNER INFORMATION As it appears on Papers.						
Owner							
EMERGENCY CONTACT				Phone#		Relationship	
EXHIBITOR INFORMATION				PLEASE SEND COPY OF AQHA CARD			
Rider #1				Rider #2			
Name: DOB:				Name: DOB:			
AQHA#		Exp Date		AM Youth Level 1		AQHA# Exp Date AM Youth Level 1	
Address				City, ST Zip			
Relationship to Owner				Relationship to Owner			
Class Numbers				Class Numbers			

I, the undersigned, hereby release NQHA, WSVRHA, AQHA, Facility, their officers, members, agents, employees, representatives, of and from all claims, demands, actions or cause of action of any kind of nature whatsoever, whether now known or ascertained, or which may hereafter develop or accrue in favor of myself, my heirs, representatives, or dependents, on account of or by reason of any injury, loss or damage, which may be suffered by me or them or any of them or any other property, animate or inanimate, belonging to me or used by me, because of any matter, thing or condition, negligence or default, or any person whatsoever. By my signature below I hereby acknowledge that I meet the criteria for eligibility to compete in the classes entered according to the guidelines set forth in the AQHA Rule Book.

STALLS _____ Arrival Date _____ Departure _____
 # SHAVINGS _____
 HOOKUPS FULL _____ POWER ONLY _____

PrintName: _____
 Signature: _____ Date _____

For more information contact Kathy Gould 559-760-0512
Kathy.saddleup@gmail.com
 Online entries available at www.saddleup-enterprises.com