

Responsible Party (A SIGNED CHECK MUST BE LEFT): _____

Northwest Florida Quarter Horse Assoc.

September Show - NSBA Entry Form

BACK # Paper: _____ AQHA Cards: _____
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Horses's AQHA Name: _____	Sex: S M G	Yearl Foaled: _____
Registration Number: _____		
Owner: _____	City: _____	State: _____
Register of Merit(s) Earned: Open _____ Amateur _____ Youth _____		

Exhibitor #1	Open	Amateur	Youth	DOB: _____
Name: _____	Relation to Owner: _____			
AQHA ID Number: _____	Exp Date: _____			
Address: _____	Phone: _____			
City: _____	State: _____	Zip: _____		

Exhibitor #2	Open	Amateur	Youth	DOB: _____
Name: _____	Relation to Owner: _____			
AQHA ID Number: _____	Exp Date: _____			
Address: _____	Phone: _____			
City: _____	State: _____	Zip: _____		

<u>Class Numbers</u>		

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I, the undersigned, hereby release NWFQHA, 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.

I have read and understand the terms and conditions of the event and agree to abide by those terms and conditions and the AQHA Rule Book for this class/classes and division. I have the authority and hereby do, by making this entry/entries, assume responsibility for and bind owner, rider, and/or agent to the terms and conditions of the Release of Waiver of Liability. I warrant that I am of legal age, or am the parent or legal guardian of the participant named above, and that I have read and fully understand the foregoing terms.

Signature: _____ Date: _____

Shavings (# of bags): _____ Hook-up (# of nights): _____ Tack Stall: _____ Additional Horse: _____ Pattern Book: _____