

NMQHA SHOW ENTRY FORM

Cash Office Use Only Check Number

--

Fill one out for each horse-Duplicate as needed

\$ _____

Horse's AQHA Reg#	Horse's Name	Year Foaled	SEX: (Check one) S M G
-------------------	--------------	-------------	-------------------------------------

Owner's AQHA#	Card Expires	Owner's Name	Owner's Address	Owner's Phone
---------------	--------------	--------------	-----------------	---------------

EX. AQHA #	Card Expires	Exhibitor's Name	Status: Check if Applicable <i>AMATEUR</i> <i>YOUTH</i> <i>NOVICE</i>	Date of Birth
			Relationship to owner:	

DAY1									
DAY2									
DAY3									
DAY4									

Please Choose A Show

EX. AQHA #	Card Expires	Exhibitor's Name	Status: Check if Applicable <i>AMATEUR</i> <i>YOUTH</i> <i>NOVICE</i>	Date of Birth
			Relationship to owner:	

DAY1									
DAY2									
DAY3									
DAY4									

EX. AQHA #	Card Expires	Exhibitor's Name	Status: Check if Applicable <i>AMATEUR</i> <i>YOUTH</i> <i>NOVICE</i>	Date of Birth
			Relationship to owner:	

DAY1									
DAY2									
DAY3									
DAY4									

Excel Associates www.excelshows.com
 Phone: 303-828-3822 Fax: 303-828-4099
 Email: info@excelshows.com
 5398 Aspen Avenue, Erie, CO 80516

In accepting my entry, I hereby release NMQHA, its sponsors officers, members, employees, and volunteers at this show from any claim or right for damages which occur to me or my horse. I assume full responsibility for any damages done by me or my Horse at this show. I herby agree to pay all charges incurred by my horse at this Circuit.

or Submit EMAIL

Date Authorized Signature of Owner/Agent

Revised 03/10

ENTRY FEES	OFFICE FEE
STALLS	TACK ROOM
DRUG FEE	OTHER