Is this horse Solid Paint Bred? Yes or No

Office Use: Coggins: ___

Rabies: __

Reg. Papers _

APHA Cards _

Garden State Paint Horse Club APHA Show "Spring Fling"

Back #

NAME OF HORSE:						Date:		
Registration #		Year Foaled:		(Circle One)	STALLION	MARE	GELDING	
Owner Name	:	Owner APHA # Street		Street Address:	t Address:			
City:	State: Zip:	Phone#:En		nail:				
	EXHIBITOR #1		EXHIBITOR #2		EXHIBITOR #3			
Name:		Name:		Name:				
City/State:		City/State:		City/State:	City/State:			
APHA #	Exp:	APHA #	Exp:	APHA #	APHA # Exp:			
DOB:/_	/ Age as of 1/1/2020	DOB://	Age as of 1/1/2020	DOB:/	DOB:/ Age as of 1/1/2020			
Type Memb	ership: (Circle One):	Type Membership: (Circle One):		Type Members	Type Membership: (Circle One):			
Class #	Class Name:	Class #	Class Name:	Class #	Clas	s Name:		
	In accepting my entry, I here any claim or right of damag for any damages done by m Owner/Exhibitor Signature (es, which may occ ne or my horse at t	cur to me or my horse. I also					