Is this horse Solid Paint Bred?

Yes or No

Garden State Paint Horse Club APHA Show

"September To Remember"

Back #

Date: _____

NAME OF HORSE: _____

Registration # _____ **Year Foaled:** _____ **(Circle One) STALLION MARE GELDING**

Owner Name: _____ **Owner APHA #** _____ **Street Address:** _____ **City:** _____

State: _____ **Zip:** _____ **Phone#:** _____ **Email:** _____

EXHIBITOR #1

Name: _____

City/State: _____

APHA # _____ Exp: _____

DOB: ___/____/_____ Age as of 1/1/2020 _____

Type Membership: (Circle One):

Open Am. Nov. Am. Am. W/T
Youth Nov. Youth Youth W/T

Relationship: _____

EXHIBITOR #2

Name: _____

City/State: _____

APHA # _____ Exp: _____

DOB: ___/____/_____ Age as of 1/1/2020_____

Type Membership: (Circle One):

Open Am. Nov. Am. Am. W/T
Youth Nov. Youth W/T

Relationship: _____

EXHIBITOR #3

Name: _____

City/State: _____

APHA # _____ Exp: _____

DOB: ___/____/_____ Age as of 1/1/2020_____

Type Membership: (Circle One):

Open Am. Nov. Am. Am. W/T
Youth Nov. Youth W/T

Relationship: _____

Class #	Class Name:	Class #	Class Name:	Class #	Class Name:

In accepting my entry, I hereby release the sponsor, their officers, members and co-sponsors at this show from any claim or right of damages, which may occur to me or my horse. I also assume and accept full responsibility for any damages done by me or my horse at this show.
Owner/Exhibitor Signature (required): _____

Office Use: Coggins: _____ **Rabies:** _____ **Reg. Papers** _____ **APHA Cards** _____