

APHA Entries this side -- Carolina Paint Horse Club Show Show Dates: _____

Responsible Party:		
Horse's Name:	Back #	
Circle		
Gender: M S G Year Born: _____	APHA Reg #: _____	
Owner: _____	Owner ID# _____	Exp. Date _____
Address:		# of stalls: _____
City: _____ State: _____ Zip: _____ Phone: _____		Stalled with: _____
YOUTH Information – EXACTLY as it is listed on your APHA card		
Exhibitor's Name: _____	Birthdate: ____/____/____	Youth APHA Card #: _____
Address:		
City: _____	State: _____	Zip: _____
Exhibitor's relationship to owner: _____		Novice: Yes No ?
Class #: \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ /		
AMATEUR Information – EXACTLY as it is listed on your APHA card		
Exhibitor's Name: _____	Birthdate ____/____/____	Amateur APHA Card # _____
Address:		Exp. Date(s): _____ Ama Nov/W/T
City: _____	State: _____	Zip: _____
Exhibitor's relationship to owner: _____		Walk/Trot carded: Yes No? Novice: Yes No ?
Class #: \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ /		
OPEN Information – EXACTLY as it is listed on your APHA card		
Exhibitor's Name: _____	Birthdate ____/____/____	APHA Card # _____
Address:		Exp. Date: _____
City: _____	State: _____	Zip: _____
Exhibitor's relationship to owner: _____		
Class #: \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ / \ /		

**For emergency purposes:
Contact No. on grounds
Cell Phone: _____**

Misc. Fees: _____

"WARNING" Under North Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina General Statutes."
Lake Waccamaw, APHA and CPHC, PtHAC and PtHA shall be held harmless of all liability from any and all accidents or injuries sustained by the undersigned, or any other person on whose behalf I/We have signed this release.sustained by this release.

Signature: _____ Print Name: _____

Note: Entry form will not be accepted without a signature above, nor will it be accepted without a signed check.

PtHA Entries – Only one Pinto, Youth, Amateur or Open Exhibitor per form—Lake Waccamaw Show Date _____

Responsible Party: _____				Back No. _____
Horse's Registered Name: _____				Classification (circle): Horse Pony Mini Pattern (circle): Overo Tobiano Solid
Circle _____				
Gender: M S G Year Born: _____	PtHA Reg #: _____			
Lessee/Owner: _____	Owner/Lease ID#: _____	Exp Date: _____	Type (circle): Stock Hunt Pleasure Saddle Gypsy Drum Utility	
Address: _____				# of stalls: _____ Stalled with: _____ <hr/> _____
City: _____	State: _____	Zip: _____	Phone: _____	
YOUTH Information – EXACTLY as it is listed on your PtHA card				
Exhibitor's Name: _____				Birthdate: / /
Address: _____				Youth PtHA Card #: _____
City: _____				State: _____
Phone No: _____				Zip: _____
Exhibitor's relationship to owner: _____				Novice: Y N ?
Class #: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
AMATEUR Information – EXACTLY as it is listed on your PtHA card				
Exhibitor's Name: _____				Amateur PtHA Card # _____
Address: _____				Exp. Date: _____
City: _____				State: _____
Phone No. _____				Zip: _____
Exhibitor's relationship to owner: _____				Birth date: _____
Class #: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				
OPEN Information – EXACTLY as it is listed on your PtHA card				
Exhibitor's Name: _____				Phone No.: _____
Address: _____				PtHA Card # _____
City: _____				State: _____
Exhibitor's relationship to owner: _____				Zip: _____
Exp. Date: _____				_____ / _____ / _____
Class #: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				

**For emergency purposes:
Contact No. on grounds _____
Cell Phone: _____**

Misc. Fees: _____

"WARNING" Under North Carolina law, an equine activity sponsor or equine professional is not liable for an injury to or the death of a participant in equine activities resulting exclusively from the inherent risks of equine activities. Chapter 99E of the North Carolina General Statutes." Lake Waccamaw, APHA and CPHC, PtHAC and PtHA shall be held harmless of all liability from any and all accidents or injuries sustained by the undersigned, or any other person on whose behalf I/We have signed this release.sustained by this release.

Signature: _____ Print Name: _____
 Note: Entry form will not be accepted without a signature above, nor will it be accepted without a signed check.
Incomplete entry form may result in a loss of PtHA points.