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: _____**

Stalled with:

City: State: Zip: Phone:

YOUTH Information – **EXACTLY** as it is listed on your APHA card

Youth APHA Card #:

Exhibitor's Name: Birthday: / /

Address:

City: State: Zip:

Exp. Date(s):

___/___/___Nov Yth

Exhibitor's relationship to owner: Novice: Yes No ?

___/___/___AJPHA

Class #:

AMATEUR Information – **EXACTLY** as it is listed on your APHA card

Amateur APHA Card #

Exhibitor's Name: Birthday / /

Address:

Exp. Date(s): Ama Nov/

City: State: Zip:

____/____/____W/T

Walk/Trot carded: Yes No?

Exhibitor's relationship to owner: Novice: Yes No ?

____/____/____APHA

Class #:

OPEN Information – **EXACTLY** as it is listed on your APHA card

Exhibitor's Name: Birthday / /

APHA Card #

Address:

City: State: Zip:

Exp. Date:

____/____/____

Exhibitor's relationship to owner:

Class #:

For emergency purposes:
Contact No. on grounds

Misc. Fees: _____ **Cell Phone:** _____

"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."
JB Hunt Horse Complex, APHA and CPHC, 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.