Halloween Spooktacular Show Entry Form -- Show Date: October 27, 28, & 29 -- Pre Entry Date: October 9, 2023

Person Submitting Entry:					Email: Phone Number:								
Address:													
1) Registered Name of Horse		Reg	Registration #				AMHR/ASPC/ASPR/NSPPR						
Sex DOB	Owner/Lessee				City,State								
Exhibitor's Name	Membership # Youth or Amateur Youth DOB				Classes								
2) Registered Name of Horse					Registration #				AMHR/ASPC/ASPR/NSPPI				
Sex DOB	Owner/Lessee				C:	ity,State _					_		
Exhibitor's Name	Membership # Youth or Amateur Youth DOB				1 1	1		Classes					
3) Registered Name of Horse					Registration #				AMHR/ASPC/ASPR/NSPPF				
Sex DOB	Owner/Lessee					City,State					-		
Exhibitor's Name	Membership # Youth or Amateur Youth DOB							Classes	lasses				

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4) Registered Name of Horse					Registration #					AMHR/ASPC/ASPR/NSPP			
Sex DOB O		City,State											
Exhibitor's Name	Membership # Youth or Amateur Youth DOB									Classes			
	•												
Office Fee (per Horse per Registry) Late Entry Fee (per Horse) Open Classes Amateur Classes (must have Amateur #) Youth Classes (have Youth #) COOL Classes Non Rated Classes Stall Fee Second Horse in Stall Shavings Showing off of trailer per day RV Parking per day	_								TH THE CARE)			
			4%	CHA	RGE F	FOR CA	ARD US	SE. I D	O ACCEP	T PAYPA	L, VENMO, ZE	LLE.	
Total Amount Enclosed		\$		NO REFUNDS OR EXCHANGE OF HORSE WITHOUT VETERINARIAN'S STATEMENT									
This show is approved and conducted under the rules be bound by all rules and regulations of ASPC/AMH this event. UNDER TEXAS LAW (CHAPTER 87 PARTICIPANT IN A LIVESTOCK SHOW RES	R, agree to hold harm , CIVIL PRACTICE	less the managers and sp AND REMEDIES CO	ponsors of the sho	w from a OCK SH	ll liability IOW SP	y in case o	of accident	t, theft, inju	iries or loss in	any way assoc	ciated with my particip		
THIS FORM MUST BE SIGNED BY T	HE EXHIBITO	R IN ORDER TO	PARTICIPA'	TE IN	THE S	HOW.							
My signature is proof that I have read, understand an	d accept this statemen	t.											
Authorized Signature		Parent or Guardian signature (required for all Youth Exhibitors) Date											