



Responsible Party: \_\_\_\_\_ Phone #: \_\_\_\_\_

Horse Name: \_\_\_\_\_ AQHA ID #: \_\_\_\_\_

Year Foaled: \_\_\_\_\_ Sex: \_\_\_\_\_

Sire: \_\_\_\_\_ Dam: \_\_\_\_\_

Owner Name: \_\_\_\_\_ AQHA ID#: \_\_\_\_\_ AQHA Exp: \_\_\_\_\_

NSBA ID#: \_\_\_\_\_ NSBA Exp: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Exhibitor 1

Name: \_\_\_\_\_ AQHA ID#: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Card Type: \_\_\_\_\_ NSBA ID#: \_\_\_\_\_ Exp Date: \_\_\_\_\_

DOB: \_\_\_\_\_ Relationship to Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### Exhibitor 2

Name: \_\_\_\_\_ AQHA ID#: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Card Type: \_\_\_\_\_ NSBA ID#: \_\_\_\_\_ Exp Date: \_\_\_\_\_

DOB: \_\_\_\_\_ Relationship to Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Exhibitor 3**

Name: \_\_\_\_\_ AQHA ID#: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Card Type: \_\_\_\_\_ NSBA ID#: \_\_\_\_\_ Exp Date: \_\_\_\_\_

DOB: \_\_\_\_\_ Relationship to Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Exhib #	Class #	Class Name

Show Secretary: Ashley Kanaman – (903)-274-6888

Please email to: [akentries@gmail.com](mailto:akentries@gmail.com)

Pre-Registration deadline – March 15, 2021

*\*Please attach horse papers and current membership cards with your entry form*