

WESTERN MONTANA QH SHOWS

STATE BACK # _____

LAST NAME _____

ONE ENTRY PER OWNER

Office Only	OPEN ENTRIES BELOW THIS LINE								NAME OF HORSE	REG #	SEX	DOB	OWNER	EXHIBITOR	ENTRY FEE	
	FRI	SATURDAY/SUNDAY														
AMATEUR / SELECT ENTRIES BELOW THIS LINE																
NOVICE AMATEUR ENTRIES BELOW THIS LINE																
YOUTH ENTRIES BELOW THIS LINE																
NOVICE YOUTH ENTRIES BELOW THIS LINE																

I hereby release WMQHA and the Sapphire Arena from any loss or damages that may occur, and it shall be the condition of entry that each exhibitor shall hold the horse show management blameless of any loss or otherwise. All owners and exhibitors will be held responsible for any damage incurred by them or their agents to barns or properties on the show grounds and will be billed accordingly.

Signature _____
 Name _____
 Address _____
 City/State/Zip _____
 Signature of Parent/Guardian _____

AQHYA # _____
 Youth DOB _____
 Owner of Horse _____
 Relationship of Youth to Owner _____
 Open Handler AQHA # _____
 Amateur AQHA # _____
 Owner of Horse _____
 Relationship of Amateur to Owner _____

MAKE CHECKS PAYABLE TO: WMQHA

DRUG FEE \$5/HORSE/JUDGE \$ _____
 OFFICE FEE \$10 PRE PAID
 \$25 NOT PRE PAID \$ _____
 # OF STALLS _____ STALL FEE
 \$105 PRE PAID OR \$125 NOT PRE PAID \$ _____
 EXTRA STALL NIGHTS \$30 PER NIGHT \$ _____
 NOVICE DAY FEE \$70 PER JUDGE \$ _____
 NOVICE DAY FEE \$70 PER JUDGE \$ _____
 CATTLE FEE \$75 PER DAY PRE PAID
 \$100 PER DAY NOT PRE PAID \$ _____
TOTAL \$ _____