

ARAB ENTRY FORM

EIA VERIFIED: _____ (ONE EXHIBITOR PER ENTRY FORM) ENTRY NUMBER: _____ DATE _____

PLEASE PRINT ALL INFORMATION:

AGE on January 1st of current year (if under 18 years): _____

RIDER/HANDLER: _____ CLUB _____

ADDRESS: _____ CITY/STATE _____ ZIP _____

E-MAIL ADDRESS: _____

FEES: ADULTS \$5.00 PER CLASS / JUVENILES \$3.00 PER CLASS (+ \$5.00 OFFICE CHARGE PER EXHIBITOR)

CLASS #	HORSE	LESSEE OR OWNER	FEE: \$
CLASS #	HORSE	OWNER	FEE: \$
CLASS #	HORSE	OWNER	FEE: \$
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CLASS #	HORSE	OWNER	FEE: \$
CLASS #	HORSE	OWNER	FEE: \$
CLASS #	HORSE	OWNER	FEE: \$
CLASS #	HORSE	OWNER	FEE: \$
CLASS #	HORSE	OWNER	FEE: \$

CHECK NO. _____

CASH \$ _____

REC'D BY: _____

CLASS SUBTOTAL: \$ _____

\$5.00 OFFICE CHARGE: _____
(PER EXHIBITOR)

TOTAL DUE: \$ _____

\$25.00 Fee for Returned Checks

*****IF YOU PLAN TO RUN A TAB YOU MUST LEAVE A SIGNED BLANK CHECK FOR YOUR ENTRIES TO BE ACCEPTED!!!

THERE WILL BE A TACK CHANGE BETWEEN CLASSES: _____

TWO MINUTE GATE CALL UNLESS YOU HAVE A TACK CHANGE THAT IS RECORDED!

I AGREE THAT ARAB AND MARCHANT HILLS ARENA WILL NOT BE HELD RESPONSIBLE FOR ACCIDENTS OR INJURIES TO HORSE OR HANDLER.

SIGNATURE REQUIRED ON ALL ENTRY FORMS:

SIGNATURE _____ (PARENT OR GUARDIAN IF UNDER 18 YEARS OF AGE)