



BACK # _____

Circle one: Mare Gelding Stallion ROM Yr Earned _____

Make checks payable to:
Dixie National

Horse's Name _____

Year Foaled _____ AQHA Registration # _____

NRHA License # _____

NSBA License # _____

Owner _____

NSBA Card # _____ Exp Date _____

NRHA Card # _____ Exp Date _____

Address _____

City _____ State _____ Zip _____

A) YOUTH Information- EXACTLY as listed on your AQHA Card (Small Fry Also)

Exhibitor's Name _____ Birthday ___/___/___

Address _____

City _____ State _____ Zip _____

AQHA Card # _____ Exp Date _____

NSBA Card # _____ Exp Date _____

NRHA Card # _____ Exp Date _____

Relationship to Owner _____

B) AMATEUR Information - EXACTLY as listed on your AQHA Card

Exhibitor's Name _____ Birthday ___/___/___

Address _____

City _____ State _____ Zip _____

AQHA Card # _____ Exp Date _____

NSBA Card # _____ Exp Date _____

NRHA Card # _____ Exp Date _____

Relationship to Owner _____

C) OPEN Information - EXACTLY as listed on your AQHA Card

Exhibitor's Name _____

Address _____

City _____ State _____ Zip _____

AQHA Card # _____ Exp Date _____

NSBA Card # _____ Exp Date _____

NRHA Card # _____ Exp Date _____

Horses are entered at your own risk and are subject to AQHA rules, under which the following classes will be conducted. In case of death, accident, injury or theft, to the exhibitor, their family, horses or property, NO CLAIMS will be honored against MQHA or any men. By signing below, you acknowledge and agree to the above. This show /classes are subject to video recording.

Signature of Participant _____ Date _____

Cell phone of participant AT THE SHOW _____

Stalled with _____
Responsible Party _____

OVER FOR CLASSES