

PHBA # _____ HORSE'S NAME _____
 OWNERS ID # _____ OWNERS NAME _____
 ADDRESS _____
Street Address *City, State, Zip*
 EMAIL ADDRESS _____ CONTACT PHONE # _____

I, (We), the owner(s), exhibitor(s), hereby request to enter the even(s) indicated and agree to abide by the By-Laws. Standing Rules and, Judging and Show Rules of the Palomino Horse Breeders of America, which I, (We)k have read and understand. I, (We), hereby release the PHBA and the organization sponsoring the show (Texas Palomino Exhibitors Association) and its members from any loss to myself, employees, agents, horses, and or equipment while attending and/or participating in this show. The provisions contained herein are hereby made a part of this entry agreement. Show management reserves the right to add, combine, or cancel classes.

UNDER TEXAS LAW (Chapter 87), CIVIL PRACTICE AND REMEDIES CODE, AN EQUINE PROFESSIONAL IS NOT LIABLE FOR AN INJURY TO OR THE DEATH OF A PARTICIPANT IN EQUINE ACTIVITIES RESULTING FROM AN INHERENT RISKS OF EQUINE ACTIVITIES.

Show Management is not responsible for exhibitor errors in listing numbers.

		Owner/Agent/Exhibitor Signature	Show Dates			
<input type="checkbox"/> NOVICE YOUTH	Exhibitor Name _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> 5-9 WALK TROT	Exhibitor ID # _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> YOUTH 13 & UNDER	<i>Youth Age As</i> _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> YOUTH 14-18	<i>Of Jan. 1</i> _____	SAT	SUN	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> NOVICE AMATEUR	Exhibitor Name _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> AMATEUR	Exhibitor ID # _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> SELECT AMATEUR		SAT	SUN	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> OPEN CLASSES	Exhibitor Name _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Exhibitor ID # _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
		SAT	SUN	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> ALL BREED 18 & UN	Exhibitor Name _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> ALL BREED 19 & OV	Exhibitor ID # _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Shows to (1) Judge Only</i>	SAT	SUN	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> CHALLENGED RIDER	Exhibitor Name _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> CHALLENGED RIDER ADV	Exhibitor ID # _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<i>Shows Saturday Only</i>	SAT	SUN	<input type="text"/>	<input type="text"/>	<input type="text"/>

Pre-Entries must be received by the show secretary the Monday before the show with all complete paperwork.

PRINT FORM

	<u>Pre-Entries</u>	<u>At Show</u>
OFFICE FEE/PER JUDGE	10.00	20.00
PER CLASS/PER JUDGE	10.00	12.00
MAX FEE PER JUDGE	50.00	65.00
STALL FEE PER NIGHT/\$40 FOR 2 NIGHTS	25.00	25.00
PER BAG SHAVINGS *	7.00	7.00
TACK STALL PER NIGHT/\$40 FOR 2 NIGHTS	25.00	25.00
RV PER NIGHT/\$25 per night	25.00	25.00

INSTRUCTIONS :

- Option 1: Fill out form online, print, sign, scan and email to secretary.
- Option 2: Fill out form online, print, sign, fax to secretary (with cover page).
- Option 3: Print form, complete & sign, scan or fax (with cover page) to secretary.

Show Secretary: **Billie Jones** Email: **billiejones47@hotmail.com**
P.O. Box 132533 Phone: **903-571-5647**
Tyler, TX 75713 Fax: **903-592-2349** * Please add a cover page

NO OUTSIDE SHAVINGS ALLOWED!
 (Clean-Out fee will be assessed if you are caught unloading shavings)



Owner/Exhibitor/Agent must check in with Show Secretary to present registration papers, membership cards, negative coggins test, & arrange payment with cash or signed check.