TEXAS PALOMINO EXHIBITORS ASSOCIATION ***ENTRY FORM*** **BACK #** _____

PHBA # _____ **HORSE'S NAME** _____

OWNER'S ID # _____ **OWNER'S NAME** _____

ADDRESS _____

STREET ADDRESS *CITY, ST, ZIP*

I, (We) the owner(s), exhibitor(s), hereby request to enter events(s) indicated agree to abide by the By-Laws, Standing Rules, Judging & Show Rules of the Palomino Horse Breeders of America, which I, (We) have read and understand. I, (we) hereby release 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 PRACTIVE 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 exhibitors error in listing numbers

_____ ***Owner/Agent/Exhibitor Signature***

_____ ***Show Dates***

☐	5-9 WALK TROT	Exhibitor Nam					
☐	10-18 WALK TROT	Exhibitor ID#					
☐	YOUTH 13 & UNDER						
☐	YOUTH 14-18						
☐	AMATEUR WALK TROT	Exhibitor Nam					
☐	AMATEUR	Exhibitor ID#					
☐	AMATEUR SELECT						
☐	OPEN CLASSES	Exhibitor Nam					
	PALOMINO	Exhibitor ID#					
☐	ALL BREED 18 & UNDER	Exhibitor Nam					
☐	ALL BREED 19 & OVER	Exhibitor ID#					
☐	CHALLENGED RIDER W-T	Exhibitor Nam					
☐	CHALLENGED RIDER ADV	Exhibitor ID#					

PRE-ENTRY FEES		AT SHOW FEES	
____ PER CLASS/PER JUDGE @ $10	_____	____ PER CLASS/PER JUDGE @ $12	_____
____ OFFICE FEE PER JUDGE ___$10	_____	____ OFFICE FEE PER JUDGE ___$20	_____
____ MAX FEE @ $50 PER JUDGE	_____	____ MAX FEE @ $65 PER JUDGE	_____
____ STALLS PER NIGHT @ _____	_____	____ STALLS PER NIGHT @ _____	_____
____ SHAVINGS _____ BAGS	_____	____ SHAVINGS _____ BAGS	_____
____ RV PER NIGHT @ _____	_____	____ RV PER NIGHT @ _____	_____
Total $	_____	Total $	_____

INSTRUCTIONS
Fill Out Online, Print Form,Scan, & Email or Print Form.

EMAIL: billiejones47@hotmail.com

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.