



# PNQHA Entry Form

## ENTRY FORM

BACK NUMBER

Exhibitor Name: \_\_\_\_\_ Exhibitor Age: \_\_\_\_\_

Horse Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Horse Age: \_\_\_\_\_

Exhibitor Email: \_\_\_\_\_ Phone: \_\_\_\_\_

### CLASSES ENTERED

Please write  
the class  
number in  
the box to the  
right

### Fees:

\$10.00/Class Entered # of Classes entered \_\_\_\_\_ \$ \_\_\_\_\_

**Total Fees Due:** \$ \_\_\_\_\_

Please makes checks out to PNQHA.

I do hereby consent and agree that the Pacific Northwest Quarter Horse Association and any cooperative person or groups shall not be held responsible for loss, damage and/or liability sustained or suffered while on the show grounds and during participation in said horse show.

\_\_\_\_\_  
OWNER/AGENT

\_\_\_\_\_  
PARENT/GUARDIAN OF MINOR