AHAM SUMMER ONE-DAY SHOW - I

Show Dates: July 27th & July 28th 2019

Mail to: Sara Ressler 5985 Cuthbert Rd.

White Lake, MI 48386

ENTRIES CLOSE 7/18/19

saressler@aol.com

PLEASE TYPE OR PRINT - ONLY ONE OWNER PER ENTRY FORM.	All entries must be complete. Enclose correct fees, copies of horse registration papers
purchse contract (if applicable), amateur certification (if applicable), AHA membership	cards for each rider, driver, handler, and owner.

purchse con	ntract (if applicable), amateur certification (i	т арріісавіе), А н				Color	-	=	
Name of First Horse			Reg. No		DOB Sex		Height		
	Sire	Dam		Horse USEF :	#	Horse USDF	#	ł	
						THOUSE GODI W		Entry Fees	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class#s					
								1.	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class#s				\$	
						<u> </u>			
								\$	
Formo	For more than two riders with same horse, use next table, leaving Name of Second Horse		Reg. No DOB		Sex	Color	Height	1	
	Sire	Dam			#	Horse USDF #			
								Entry Fees	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class#s					
								\$	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class#s				*	
								1.	
***PHOT	O COPIES REQUIRED of all Reg Pa	ners Roth A	MA and USFF			<u> </u>		\$	
	pership cards for all owners/rid	-		APLETE ENTRY FEE.**	*	Total CI	ass Fees	\$	
OWNER (as appears on reg papers or contract) (Ma	y attach mailing I	label)]				
Name	ne AHA# & Exp date				Require	quired Fees Per Horse: Stalls \$60 each \$			
Address	USEF#								
City, State	Zip				Office Fee \$18/horse \$				
	·				AHA Fee \$17/horse				
Email			Phone#		J	(res 9-90 \$7 / Recogn. \$10)			
TRAINER	(Mandatory)				1	ΔHΔ SEM			
Name			AHA# & Exp date	0		AHA SEM \$35/person Option Class - \$30			
				=		_			
Address			USEF#			_Credit Car	d Fee - \$15		
City, State			Zip		<u> </u>				
Email		Phone#				Camper F	ee - \$25 per night	\$	
Amateur Ow	vner Relationship to Horse Owner								
STABLE \	WITH								
	signing this entry form acknowledges that he/she	has read the front a	and reverse of this E	ntry Form and agrees to the ac	pplicable terms.				
condition, wai	ivers, releases, indemnification and consent as set	t forth herein. Each	person agrees that	the information is accurate to	the best of his/her				
	Il owner, trainers, riders, drivers & handlers must					-			
Circle Type	Master Card Visa	and the back. I	AMEX	Discover					
Name on Cr									
Billing Addre							Total Due \$		
Credit Ca		EXP)	Code			- στα. σασ φ	-	
Office Use Only						Mak	e Checks Payab	e to:	
	•	g Papers / S	Signatures	Coggins / Hea	alth	2110211	AHAM		
	Amt Rec'd \$	g 1 apolo / C	Credit / Bala				AL IAM		
Ck#	AIIIL NECU \$		Oredit/ Dala	σ Due φ					

AHAM SUMMER ONE-DAY SHOW - II

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White Lake, MI 48386

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saressler@aol.com

PLEASE TYPE OR PRIN	T - ONLY ONE OWNER PER	ENTRY FORM.	. All entries must be complete.	Enclose correct fees, copies	of horse registration papers
nurchs e contract (if applicable	amateur certification (if applicable	e) AHA membershi	in cards for each rider driver ha	andler and owner	

	Name of First Horse		Reg. No DOB Se		Sex	Color	Height	1	
	Sire	Dam	ı	Horse USEF	#	Horse USDF	#	1	
								Entry Fees	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class #s					
								1.	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class #s				\$	
	,							4	
								\$	
Formo	ore than two riders with same horse, use ne				_				
	Name of Second Horse		Reg. No	DOB	Sex	Color	Height		
	Sire	Dam		Horse USEF	#	Horse USDF	#	4	
	Sile	Dani	Daiii		"	THOUSE CODI	ır	Fatru Face	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	o date Class#s					Entry Fees	
								\$	
Rider/driver/	/handler (Walk Trot riders include DOB)	AHA# & Exp	date	Class#s					
].	
***PHOT	O COPIES REQUIRED of all Reg Pa	ners Both	ΔHΔ and LISEE				l	Φ	
	bership cards for all owners/rid	•			**	Total Cl	ass Fees	\$	
OWNER ((as appears on reg papers or contract) (Ma	y attach mailing	label)						
Name			AHA# & Exp date	e	Require	ed Fees Per	Horse:		
				-	1			•	
Address			USEF#		-	_Stalls \$60	eacn	\$	
City, State	State Zip					Office Fee \$18/horse \$			
Email	mail Phone#				AHA Fee \$17/horse				
						(res 9-90 \$7 / Recogn. \$10)			
TRAINER (Mandatory)					AHA SEM \$35/person				
Name	Name AHA# & Exp date			e		Option Class - \$30			
					Credit Card Fee - \$15				
Address	ess USEF#				-	_ Credit Car	a ree - \$15		
City, State			Zip						
Email			Phone#			Camper F	ee - \$25 per night	\$	
A mataur Ou	wner Relationship to Horse Owner					_			
Amateur Ow	when relationship to horse Owner								
STABLE	WITH				_				
Each person s	signing this entry form acknowledges that he/she	has read the front	and reverse of this E	ntry Form and agrees to the ap	oplicable terms,				
condition, wai	ivers, releases, indemnification and consent as set	t forth herein. Eac	h person agrees that	the information is accurate to	the best of his/he	<u>r</u>			
knowledge. Al	Il owner, trainers, riders, drivers & handlers must	sign on the back.	Minor entrants must	also have parent/guardian sigr	nature(s) on back.				
Circle Type	Master Card Visa		AMEX	Discover					
Name on Cr	redit Card								
Billing Addre							Total Due \$		
		Evi	D	Codo		· L	7 οια. Δαο φ		
Credit Ca		EXI		Code		B.E. L	o Chaoles Days l	la ta:	
Office Use						Mak	e Checks Payab	ie to:	
AHA / l		g Papers /	•	Coggins / Hea	alth		AHAM		
Ck#	Amt Rec'd \$		Credit / Bala	ınce Due \$					