

Complete & return to Show Secretary:
Patty Liarakos • 210-912-8679
 16240 San Pedro #180 • San Antonio, TX 78232
 liarakos9868@sbcglobal.net



Houston All Arabian Show - AVS

January 11-13, 2019 • Katy, Texas
 Show Manager - Karen Blankenship 281-804-7791

Office Use Only:
 EB# _____
 Check # _____
 Amount Pd _____
 Name on Check _____

Please type or print: only **ONE HORSE per entry form**. All entries must be complete and include fees payable by check or credit card. Copies of horse registration papers and purchase contract (if applicable) must be included. AHA Competition level membership cards for each rider, driver, handler, trainer and owner must also be included.

Name of Horse	Reg. No.	Date of Birth	Sex	Color	Height	
Sire	Dam					
Rider/Driver/Handler 1 (Date of Birth Junior Riders)	AHA#	Class#	Class#	Class#	Class#	\$ ENTRY FEES \$
Address		Class#	Class#	Class#	Class#	\$ ENTRY FEES \$
Rider/Driver/Handler 2 (Date of Birth Junior Riders)	AHA#	Class#	Class#	Class#	Class#	\$ ENTRY FEES \$
Address		Class#	Class#	Class#	Class#	\$ ENTRY FEES \$
Rider/Driver/Handler 3 (Date of Birth Junior Riders)	AHA#	Class#	Class#	Class#	Class#	\$ ENTRY FEES \$
Address		Class#	Class#	Class#	Class#	\$ ENTRY FEES \$

Each person signing this entry form acknowledges that he/she has read the front AND REVERSE SIDE (second page) of this official entry form and agrees to the applicable terms, conditions, waivers, releases, indemnification and consent as set forth herein. Each person agrees that the information is accurate as to the best of his/her knowledge. **ALL EXHIBITORS, OWNERS, TRAINERS, RIDERS, DRIVERS, HANDLERS, COACH, and his/her AGENT MUST SIGN ON THE BACK.** Minor entrants must also have parent/guardian signature(s) on the back.

OWNER (as appears on registration papers or contract)

Name AHA #
 Address
 City, State, Zip
 Phone(s) Email
 Junior/Amateur Owner's Relationship to Horse Owner

TRAINER(S) (Must be filled out. If there is no trainer, owner MUST COMPLETE trainer information.)

Trainer AHA #
 Address
 City, State, Zip
 Phone(s) Email

EMERGENCY #s

STABLE WITH

ENTRIES CLOSE
12/28/18
Post Entries Accepted
 For a "Post Entry Fee" of \$35/horse, completed post entries will be accepted until one (1) hour prior to the beginning of the session in which the horse's class is to be held.

VACCINATION REQUIREMENT - Must show proof of Rhinopneumonitis vaccination.
Shavings Delivery Schedule (Plan ahead!!):
 • Wed. (early move-in) **NONE** delivered **after 4PM.**
 • **Thur-Sun** Delivery from **7AM to 7PM.**
 • \$100 fine per stall if you bring shavings. Hay & grain will not be available.

This is a Value Show, so you will not have to pay **\$23 per horse** (Mandatory USEF fee) and **\$80** for USEF membership, Amateur Card and Show Pass.

Please support the show by sponsoring a class or two or three!

Sponsorships - Thank You! (attach form on p. 11 if possible)

___ Regular class \$35/each _____
 Class number(s) _____
 ___ Championship class \$50/each _____
 Class number(s) _____
 ___ Gold \$1,000, Silver \$500, Bronze \$250 _____
 Class number(s) _____

Class Fees _____

Stall and Shavings All horses must be in stalls
 ___ Horse or Tack Stalls @ \$85 ea. _____
 (One horse per stall; does NOT include shavings)
 ___ Day Stall @ \$40 per horse per day _____
 (One horse per stall; does NOT include shavings)
 ___ Shavings @ \$12/bag _____

Mandatory Fees

 1 AHA Education Fee (9-90): @ \$7/horse \$7
 1 AHA Results Fee @ \$8/horse \$8
 1 Office Fee @ \$35/horse \$35

Post Entry Fee

___ Post Entry Fee @ \$35/horse _____

Early Move-In/Late Move-Out Stall Fees

___ Early Move-in (1/9/19) \$25/stall _____
 ___ Late Move-out (1/14/19) \$25/stall _____

Membership

___ AHA Membership - Join your local club, online or at show

AHA Single Event Fee

___ Non-Member Fee: \$35/person _____

RV/Camper Hook-Up

___ Elec/Water @ \$40/day _____
 Get PERMIT @ Show Office. Post on Vehicle Door.

ENCLOSED TOTAL FEES \$ _____

METHOD OF PAYMENT

Check \$ _____ MasterCard \$ _____ Visa \$ _____ AmEx \$ _____

Make check payable to HAAS. Credit cards: Your credit card bill will be charged upon receipt of entry and will state "HAAS"

Card# _____ Exp. Date _____ CVV _____

Name on Card _____ Email for Receipt: _____

Billing Address _____ City/State/Zip _____

Signature _____