Entry Form

Email pre-entries to carlsonshowmgmt@gmail.com prior to August 31st along with copies of cards and papers, payment can be made when you pick up your number in the show office

Exhibitor Numbe
(assigned by office)

Paid ___ Check # _

COMPLETE OF	NE PER HORSE	,			(assigned by office)
HORSE INFOR	RMATION (as it appears or	n papers)	(-!I)		
Name:	Registration #:	Sex: M G S ((circle one)		
Year Foaled:	Registration #:		ROW: Y/N		
OWNER INFO	RMATION				N. 1. 1. 1. 1. 1.
		Δ Ο ΗΔ #·		Eyn:	Nebraska Youth -
				∟лр	enter assigned 500
City:		Stato:	Dirtii Date. 7ir	·	
Linaii / laai coo.					no. ask and we will
EYHIRITOR 1	AQHA #:	Evn·			see if it is available.
	ΑΘΠΑ π.				
Address:		neialionsnip.	Rirth Date:		
City:		Stato:	Dirtii Date. 7ir	·	
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Address:		neialionsnip.	Pirth Data:		
City:		Ctoto:	DITITI Date.	·	
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Elliali Address.					
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Nomo:	AQHA #:	Exp Polationabia:			
Address		Ctata	DITIII Date.		
		State:	ZIĻ)	
Email Address:					:£:1\
ENTRIES FOR	THIS HORSE (horse will I	be entered for all days		•	
EVUIDITOD:			Fri	Sat Sun	For Office Use Only:
EXHIBITOR: _					Per Class Fee:
Class #:	Class Name:				\$16 x# of classes =
	Class Name:				All show fee:
Class #.	Class Name:				\$150 all judges =
	Class Name:				Small Fry Class Fee:
Class #:	Class Name:				\$5 x# of classes =
Class #:	Class Name:				Small Fry All show fee:
Class #:	Class Name:				\$40 all judges =
EVI IIDITAD.					Cattle Fees:
EXHIBITOR: _					Team Roping \$19/run =
Class #:	Class Name:				Calf Roping \$23/run =
Class #:	Class Name:				
Class #:	Class Name:				Stalls:\$25 x nights =
Class #:	Class Name:				(# of stalls) x
	Class Name:				=
	Class Name:				Grounds Fee:
Class #:	Class Name:				\$10 x day =
					AQHA Processing Fee:
EXHIBITOR:					\$8 x judges =
Class #:	Class Name:				
	Class Name:				Facility Cleaning Fee/horse:
	Class Name:				\$20 x # of horses =
	Class Name:				Trail Practice fee: \$10 x # of horses =
Class #:	Class Name:				# OI HOISES
Class #:	Class Name:				Payback
Class #:	Class Name:				Total Due