**American Buckskin Registry Association** *ENTRY FORM* **BACK #**

ABRA # _____ HORSE NAME _____

OWNER ID # _____ OWNER NAME _____

ADDRESS _____

*STREET ADDRESS* *CITY, STATE, ZIP*

EMAIL ADDRESS _____ *CONTACT PHONE #* _____

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* _____

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| ☐ | 10 & U WALK TROT | Exhibitor Name _____ | | | | | |
| ☐ | 11-18 WALK TROT | Exhibitor ID# _____ | | | | | |
| ☐ | YOUTH 13 & UNDER | *Youth Age as of* | | | | | |
| ☐ | YOUTH 14-18 | *Jan 1* _____ ☐ Sat ☐ Sun | | | | | |
| ☐ | AMATEUR WALK TROT | Exhibitor Name _____ | | | | | |
| ☐ | AMATEUR | Exhibitor ID# _____ | | | | | |
| ☐ | AMATEUR SELECT | | | | | | |
| ☐ | AMATEUR BUCKSKIN BRED | ☐ Sat ☐ Sun | | | | | |
| ☐ | BUCKSKIN BRED | Exhibitor Name _____ | | | | | |
| ☐ | BUCKSKIN OPEN | Exhibitor ID# _____ | | | | | |
| | | ☐ Sat ☐ Sun | | | | | |

**PRE-ENTRY FEES**

| | | |
|---|---|---|
| ____ | PER CLASS/PER JUDGE @ $10 | _____ |
| ____ | OFFICE FEE PER JUDGE ___$10 | _____ |
| ____ | MAX FEE @ $50 PER JUDGE | _____ |
| ____ | STALLS PER NIGHT @ _____ | _____ |
| ____ | SHAVINGS _____ BAGS | _____ |
| ____ | RV PER NIGHT @ _____ | _____ |
| | Total $ | _____ |

**AT SHOW FEES**

| | | |
|---|---|---|
| ____ | PER CLASS/PER JUDGE @ $12 | _____ |
| ____ | OFFICE FEE PER JUDGE ___$20 | _____ |
| ____ | MAX FEE @ $65 PER JUDGE | _____ |
| ____ | STALLS PER NIGHT @ _____ | _____ |
| ____ | SHAVINGS _____ BAGS | _____ |
| ____ | RV PER NIGHT @ _____ | _____ |
| | Total $ | _____ |

**INSTRUCTIONS**
*Fill Out Online, Print Form Scan, & Email* ***or*** *Print Form, & Mail to Show Secretary*

*EMAIL:* **billiejones47@hotmail.com** *MAIL:* ***P.O. Box 132533, Tyler, TX 75713***

Owner/Exhibitor/Agent must check in with Show Secretary to present registration papers, membership cards, negative coggins test, & arrange payment with cash, signed check or credit card.