

PHBA # _____ HORSE'S NAME _____
 OWNER'S ID # _____ OWNER'S NAME _____
 ADDRESS _____
 STREET ADDRESS _____ CITY, STATE, ZIP _____
 EMAIL ADDRESS _____ CONTACT PHONE # _____

I, (We) the owner(s), exhibitor(s), hereby request to enter event(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 PRACTICE 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			
<input type="checkbox"/>	5-9 WALK TROT	Exhibitor Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	10-18 WALK TROT	Exhibitor ID# _____				
<input type="checkbox"/>	YOUTH 13 & UNDER	Youth Age as of _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	YOUTH 14-18	Jan 1 _____	<input type="checkbox"/>	Sat	<input type="checkbox"/>	Sun
<input type="checkbox"/>	AMATEUR WALK TROT	Exhibitor Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	AMATEUR	Exhibitor ID# _____				
<input type="checkbox"/>	AMATEUR SELECT		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	AMATEUR PALOMINO BRED		<input type="checkbox"/>	Sat	<input type="checkbox"/>	Sun
<input type="checkbox"/>	PALOMINO BRED	Exhibitor Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	PALOMINO OPEN	Exhibitor ID# _____	<input type="checkbox"/>	Sat	<input type="checkbox"/>	Sun
<input type="checkbox"/>	ALL BREED 18 & UNDER	Exhibitor Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	ALL BREED 19 & OVER	Exhibitor ID# _____				
<input type="checkbox"/>	ALL BREED WALK TROT	Shows to 1 Judge Only	<input type="checkbox"/>	Sat	<input type="checkbox"/>	Sun
<input type="checkbox"/>	CHALLENGED RIDER W-T	Exhibitor Name _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	CHALLENGED RIDER ADV	Exhibitor ID# _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PRE-ENTRY FEES

AT SHOW FEES

PER CLASS/PER JUDGE @ \$10 _____	PER CLASS/PER JUDGE @ \$12 _____
OFFICE FEE PER JUDGE ___\$10 _____	OFFICE FEE PER JUDGE ___\$20 _____
MAX FEE @ \$50 PER JUDGE _____	MAX FEE @ \$65 PER JUDGE _____
STALLS PER NIGHT @ _____	STALLS PER NIGHT @ _____
SHAVINGS ___ BAGS _____	SHAVINGS ___ BAGS _____
RV PER NIGHT @ _____	RV PER NIGHT @ _____
Total \$ _____	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.