



AQHA ENTRY FORM

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ENTRY DEADLINE: DECEMBER 1

Office Use Only
Back Number

HORSE INFORMATION (Only one horse per entry form)

Name: _____ Reg #: _____
Year Foaled: _____ Sex: M G S Trainer: _____
Person Making Entry: _____ Date: _____

I will be stalling this horse and have sent in a Stall Reservation form

OWNER INFORMATION

Name: _____ AQHA #: _____ Exp: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone Number: _____ Email: _____

EXHIBITOR AGREEMENT: Arizona National Livestock Show, Inc., WestWorld, City of Scottsdale, and AQHA, including its officers, directors, servants, agents and/or employees, herein called "ANLS" and the Owner and/or Exhibitor, including parents and/or legal representatives, herein called "Exhibitor", agree that ANLS will in no case be responsible for any loss, damage or injury to the person, animals or property of Exhibitor or, Exhibitor's agents, servants, family and/or employees, regardless of how such loss, damage or injury is occasioned and by whom. ANLS and Exhibitor further agree that Exhibitor will protect, indemnify and save harmless ANLS from any and all claims, suits and/or judgments (including the cost of defense of any such claim and/or suit by ANLS) brought by anyone as a result of any loss, damage or injury to any person, animals or property occasioned by an action or inaction of Exhibitor, either solely or in conjunction with ANLS or anyone else. ANLS assumes no responsibility for the correctness of any description given in the Premium List. Exhibitor agrees to abide by all Rules and Regulations of Arizona National Livestock Show, Inc. Participant also agrees that the Arizona National Livestock Show reserves the right to use any and all photographs and films taken during the Show for publicity purposes.

EXHIBITOR INFORMATION

Exhibitor #1: _____ DOB: _____ Class Numbers
AQHA#: _____ Am Y Exp: _____
Email: _____
Relationship to Owner: _____
(Please Check)
 I have read and agree to the Exhibitor Agreement
Signature of Exhibitor/Legal Guardian (if minor): _____

Exhibitor #2: _____ DOB: _____ Class Numbers
AQHA#: _____ Am Y Exp: _____
Email: _____
Relationship to Owner: _____
(Please Check)
 I have read and agree to the Exhibitor Agreement
Signature of Exhibitor/Legal Guardian (if minor): _____

Exhibitor #3: _____ DOB: _____ Class Numbers
AQHA#: _____ Am Y Exp: _____
Email: _____
Relationship to Owner: _____
(Please Check)
 I have read and agree to the Exhibitor Agreement.
Signature of Exhibitor/Legal Guardian (if minor): _____