

Check List

<input type="checkbox"/>	Entry Form
<input type="checkbox"/>	Registration
<input type="checkbox"/>	Coggins
<input type="checkbox"/>	Check/M O

AMERICAN CUTTING HORSE ASSOCIATION

2014 Championship Show, September 15th-20th

Aged Event Entry Form

\$12,750 ADDED

Unlimited Entries Per Rider

Entry Deadline: Postmarked by September 2, 2014

***3 Yr Old Futurity - Open & Non Pro - 2 go rounds - Combined Score

**4 Yr Olds & 5/6 Yr Olds - Open & NP - 1 - 31 entries 1 go only/32 entries or more 25% to finals plus ties

PO Box 2443

Brenham, TX 77834

979-836-3370 office

979-251-9971 fax

www.achacutting.org

HORSE (one horse per entry form, designate each class for horse and rider)

Attach a copy of registration papers and current coggins papers good through show

Horse Name: _____ Registration # _____
(as listed on registration papers)

Color _____ Sex _____ Year Foaled _____

HORSE OWNER (both owner and rider must be a member of the ACHA)

Owner: _____ ACHA# _____

Address: _____ City/State: _____ Zip: _____

Social Security Number _____ Phone Number _____

RIDER (both owner and rider must be a member of the ACHA)

A Rider: _____ ACHA# _____

Address: _____ City/State: _____ Zip: _____

Social Security Number _____ Phone: _____

B Rider: _____ ACHA# _____

Address: _____ City/State: _____ Zip: _____

Social Security Number _____ Phone: _____

LIST RIDER A OR B NEXT TO CLASS TO BE ENTERED IN ON THIS HORSE

Rider	Class	Rider	Class	\$50K LTD	
<input type="checkbox"/>	3 YR Open - \$2000 Added (EF \$700)	<input type="checkbox"/>	3 YR Non Pro - \$750 Added (EF \$500)		\$100 EF
<input type="checkbox"/>	4 YR Open - \$3000 Added (EF \$650)	<input type="checkbox"/>	4 YR Non Pro - \$2000 Added (EF \$600)		100%
<input type="checkbox"/>	5/6 YR Open - \$3000 Added (EF \$650)	<input type="checkbox"/>	5/6 YR Non Pro - \$2000 Added (EF \$600)		to purse

STALL INFORMATION (Stall required for each horse)

Trainer _____ *Designate trainer to be stalled by or leave blank to be assigned.*

Stall Request _____

Prize Money Payable To (if not designated, Owner will be paid)

Owner Rider

FEE SUMMARY (TOTAL for this horse only)

PAYMENT INFORMATION

Total Entry Fees		\$ _____
Stall (REQUIRED)		
By Bell Co. Expo)	_____ x \$100.00	\$ _____
Tack stall	_____ x \$100.00	\$ _____
Turnback horse stall	_____ x \$100.00	\$ _____
ACHA Memberships	_____ x \$50.00	\$ _____
Late Fee	_____ x \$100.00	\$ _____
Futurity Practice	_____ x \$200.00	\$ _____
TOTAL DUE		\$ _____

Daily practice pen available \$40 cattle, \$20 flag, a blank check payable to ACHA must be on hand or all works paid in full at time of works. Works are for 5 minutes. Any entry form received without payment in full or not completed will be returned without exception.

As a condition of my entry, my entering releases the ACHA; show management, and the Bell County Expo Center of any liability for accidents, bodily injury or damage to any animal, equipment or other personal property. This waiver is binding on all riders; groomers and helpers associated with the participation of the horse(s) described herein this event. This Association has the right to refuse any entries. **Schedule subject to change watch

(www.achacutting.org)**

