

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

AMERICAN CUTTING HORSE ASSOCIATION

PO Box 2443

2014 Championship Show

Brenham, TX 77834

September 15th-20th

979-836-3370 office

\$19,500 ADDED MONEY

979-251-9971 fax

Entry Deadline: Postmarked by September 2, 2014

www.achacutting.org

40% Back, Minimum of 8 - Maximum of 15 plus ties

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
<input type="checkbox"/>	Open - \$3000 Added (EF \$600)	<input type="checkbox"/>	\$15,000 N/NP - \$2000 Added (EF \$475)
<input type="checkbox"/>	Non Pro - \$3000 Added (EF \$600)	<input type="checkbox"/>	\$1000 Nov. Rider - \$1500 Added (EF \$325)
<input type="checkbox"/>	\$10,000 Novice Horse - \$2500 Added (EF \$575)	<input type="checkbox"/>	\$2500 Nov. Rider - \$1500 Added (EF \$325)
<input type="checkbox"/>	\$50,000 Non Pro - \$2500 Added (EF \$575)	<input type="checkbox"/>	Youth Junior one go (EF \$105)
<input type="checkbox"/>	\$3000 NH - \$2000 Added (EF \$475)	<input type="checkbox"/>	Youth Senior one go (EF \$105)
<input type="checkbox"/>	\$20,000 NP - \$1500 Added (EF \$325)	<input type="checkbox"/>	McDonald Shootout (Must Qualify)

STALL INFORMATION (Stall required for each horse)

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

