

Pre-entries close 3/30

Email: \_\_\_\_\_



# DOUBLE FEATURE April 7-11, 2020

AQHA Reg# \_\_\_\_\_ TRAINER:: \_\_\_\_\_

Horse's Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_

Owner's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

NSBA#: \_\_\_\_\_ LODGING \_\_\_\_\_

**Rider #1**  OPEN  AM  YTH AQHA# \_\_\_\_\_ NSBA \_\_\_\_\_ PCHA \_\_\_\_\_

Name \_\_\_\_\_ Relationship to owner \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

CLASSES


**Rider #2**  OPEN  AM  YTH AQHA# \_\_\_\_\_ NSBA \_\_\_\_\_ PCHA \_\_\_\_\_

Name \_\_\_\_\_ Relationship to owner \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

CLASSES


**Rider #3**  OPEN  AM  YTH AQHA# \_\_\_\_\_ NSBA \_\_\_\_\_ PCHA \_\_\_\_\_

Name \_\_\_\_\_ Relationship to owner \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

CLASSES


Total Entry Fees \$ \_\_\_\_\_

Stalls \$190 (Prepay separate ck) \$ \_\_\_\_\_

Haul In \$40/Day (No stall) \$ \_\_\_\_\_

R.V. Call 858-509-5245

Trail Schooling -\$40 \$ \_\_\_\_\_

Post Entry \$40 (After 3/30) \$ \_\_\_\_\_

AQHA Horse Fee/\$5 Judge \$ \_\_\_\_\_

PCHA Horse Fee \$5 \$ \_\_\_\_\_

PCHA Non Member \$5 \$ \_\_\_\_\_

State Drug Fees \$ 8.00

Office Fee \$ 25.00

Mail to:

SCQHEA  
 P.O. BOX 2155  
 COSTA MESA, CA 92628  
 (714) 444-2918

I agree to the rules, regulations, and terms of this show:

\_\_\_\_\_

Signature

TOTAL DUE \$ \_\_\_\_\_

\$20 Service Fee for accounts not closed at the show including Open Checks

STABLE WITH  TRAINER  OTHER \_\_\_\_\_