

# 2017 Nevada Paint Horse Club

Back # (assigned by Office)

**Send Entry to:**

Roy Bock  
4520 Alcorn Road  
Fallon, Nevada 89406

775-867-4441 - entry fax  
775-867-4440 - information  
[rbock@oasisol.com](mailto:rbock@oasisol.com)

NAME OF HORSE	REG #	YEAR	CIRCLE SEX
<input type="text"/>	<input type="text"/>	<input type="text"/>	STALLION MARE GELDING

OWNERS NAME (AS SHOWN ON APHA PAPERS)	ADDRESS
<input type="text"/>	<input type="text"/>
APHA ID# & Exp. Date:	
CITY	STATE
<input type="text"/>	<input type="text"/>
ZIP	PHONE # WITH AREA CODE
<input type="text"/>	<input type="text"/>

SIRE'S NAME/REG #	DAM'S NAME/REG #
<input type="text"/>	<input type="text"/>

I DO HEREBY CONSENT AND AGREE THAT THE SPONSORING ASSOCIATION, the Nevada Paint Horse Club, AND ANY COOPERATIVE PERSON OR GROUPS SHALL NOT BE HELD RESPONSIBLE FOR LOSS, DAMAGE AND/OR LIABILITY SUSTAINED OR SUFFERED WHILE ON THE SHOW GROUNDS OR DURING PARTICIPATION IN SAID HORSE SHOW. By signing this release, I act as an agent for any horse I exhibit during any Nevada Paint Horse Club show.

X   
OWNER/AGENT

X   
PARENT/GUARDIAN OF MINOR

	Exhibitor #1				Exhibitor #2			
Exhibitor Name								
Exhibitor Address								
Exhibitor Email								
APHA ID# & Exp. Date								
AM/Yth ID# & Exp. Date								
Youth Birthday								
Amateur or Master Am								
Relationship to Owner								
Class #s								
<u>Notes:</u>								

IF MORE THAN 2 EXHIBITORS ATTACH ANOTHER ENTRY