



**AZRHA SILVER SPURS  
MOTHER'S DAY SLIDE  
WESTWORLD OF SCOTTSDALE  
MAY 17-22, 2016**

**BACK #** \_\_\_\_\_

NAME OF PERSON RESPONSIBLE FOR THIS HORSE'S FEES: \_\_\_\_\_  
Please send earnings (if applicable) to: Owner \_\_\_ Trainer \_\_\_ SS# \_\_\_\_\_

# OF STALLS: \_\_\_\_\_ NAME OF GROUP FOR STALLS: \_\_\_\_\_

**HORSE INFORMATION - as it appears on NRHA COMPETITION LICENSE- complete one entry form per horse**

REGISTRATION NAME: \_\_\_\_\_ NRHA COMP. LIC # \_\_\_\_\_

SEX: M G S FOAL YEAR \_\_\_\_\_ TRAINER: \_\_\_\_\_

**OWNER INFORMATION - as it appears on NRHA COMPETITION LICENSE - SS# or Tax ID must be on file to receive payout checks**

NAME: \_\_\_\_\_ NRHA # \_\_\_\_\_ EXP DATE \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ SS#/TAX ID: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY/STATE/ZIP: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ PHONE #: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

**EXHIBITOR INFORMATION (date of birth required for PRIME TIME and YOUTH CLASSES)**

#1 NAME \_\_\_\_\_ DOB \_\_\_\_\_

NRHA # \_\_\_\_\_ Expires \_\_\_\_\_

Relationship to Owner: \_\_\_\_\_

OPEN \_\_\_\_\_ NON PRO \_\_\_\_\_ YOUTH \_\_\_\_\_

#2 NAME \_\_\_\_\_ DOB \_\_\_\_\_

NRHA # \_\_\_\_\_ Expires \_\_\_\_\_

Relationship to Ower \_\_\_\_\_

OPEN \_\_\_\_\_ NON PRO \_\_\_\_\_ YOUTH \_\_\_\_\_

CLASS NUMBERS


CLASS NUMBERS


\_\_\_\_\_ I HAVE READ AND UNDERSTAND THE SHOW RULES & LIABILITY INFO  
\_\_\_\_\_  
Signature Date

include a copy of OWNER'S & EXHIBITOR'S Current NRHA CARDS \_\_\_\_\_  
and copy of HORSE'S NRHA COMPETITION LICENSE (for NRHA CLASSES) \_\_\_\_\_

**ENTRIES ARE DUE BY MAY 3, 2016**  
**MAIL TO SADDLE UP ENTERPRISES - 33410 ROAD 800, RAYMOND, CA 93653**  
**OR EMAIL TO AZRHA@SADDLEUP-ENTERPRISES.COM / FAX 559-689-3101**  
**STALL FORMS, CHECKS OR CREDIT CARD INFO NEED TO BE SENT BY MAY 3, 2016**  
**PLEASE BRING ENTRY CHECKS OR CREDIT CARD FORMS TO HORSE SHOW (PAYABLE TO AZRHA)**

CLASS FEES:	_____
STALL OR \$50.00 HAUL IN	_____
PLEASE SEE STALL RSVP FORM FOR INFO	
VIDEO/PHOTO:	\$25.00
NRHA DRUG FEE:	\$7.00
OFFICE FEE:	\$50.00
LATE FEE:	_____
\$50.00 IF NOT RECEIVED BY MAY 3, 2016	
PAID WARM UPS:	_____
TOTAL:	_____