



Exhibitor # \_\_\_\_\_

**NORTH TEXAS SHOT CLINIC & SHOW**  
**WILBARGER CO. EVENT CENTER, VERNON, TX. SEPT 10-11, 2010**  
**You Must Show Your Membership cards and Horse License at time of entry.**

**Pre-Registration by Sept 3th via mail or Sept 6th via fax** (you can pay at the show)

All exhibitors must be a current member of the American Stock Horse Association and Stock Horse of Texas, and have an ASHA Horse competition license to compete.

All Non-Pro and Open exhibitors **and owners** must be current members of SHOT to apply for Merit Awards.

Buckles to All-around and Reserve in NP, Ltd NP, Nov, Youth, Green. Jackpot in the Open.

**Please enter only one division per entry form and one entry per horse/rider combination.**

Exhibitor's Name: \_\_\_\_\_ Age if Youth \_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ ASHA # \_\_\_\_\_ SHOT # \_\_\_\_\_

Name of Horse \_\_\_\_\_ ASHA Horse # \_\_\_\_\_ Email: \_\_\_\_\_  
Please use name on ASHA Horse License

Coggins Accession # \_\_\_\_\_ Date \_\_\_\_\_ Lab \_\_\_\_\_

By my signature below, I hereby acknowledge that I understand the risks involved in riding horses and /or cow work and voluntarily assume those risks. I agree that I will not hold the Stock Horse of Texas Association, American Stock Horse Association, Wilbarger Co. Event Center, Texas A&M University, Texas Cooperative Extension, Archer Co. 4-H Horse Club and/or the competition management nor any of their agents, officers, directors, employees, volunteers, or horse show participants or spectators liable for any injury or property damage to me, my horse, or my property, rising out of or caused by this horse competition held September 10-11, 2010. I have read this release and understand its terms.

Exhibitors Signature \_\_\_\_\_ Parent's Signature (if minor) \_\_\_\_\_

**For Limited Non-Pro, Non-Pro, and Novice riders:**

I certify that I have not received money or compensation for riding, training, or showing horses or training riders.

Signature: \_\_\_\_\_

<b>Classes show starts 8:00</b>	<b>Open</b>	<b>Non-Pro</b>	<b>Green Horse</b>	<b>LTD-NP</b>	<b>Novice</b>	<b>Youth</b>	<b>Clinic: Clinic starts 9:00</b>
All 4 Classes <small>(Includes Cattle charge)</small>	\$145 _____	\$85 _____	\$85 _____	\$85 _____	\$85 _____	\$85 _____	You must be a SHOT member
Pleasure	\$30 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	Postmarked before Sept 3rd \$85 _____ After Sept 3rd or after Sept 6th via fax \$110 _____
Trail	\$30 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	
Reining	\$30 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	\$15 _____	
Working Cow <small>(includes \$35 cattle charge)</small>	\$65 _____	\$50 _____	\$50 _____	\$50 _____	\$50 _____	\$50 _____	
Total Fees							

Total Class/Clinic Fee \_\_\_\_\_

Bookkeeping Fee \$ 20.00 \_\_\_\_\_

Late Fee, \$20 \_\_\_\_\_

**Late fee for all entries not sent in by deadline (Show and Clinic)**

Shot membership \$25.00 - \_\_\_\_\_

If not a current member

ASHA membership \$25.00 - \_\_\_\_\_

If not a current member for 2010

ASHA competition License \$15.00 - \_\_\_\_\_

If not already purchased

Stalls \$ 30 for the weekend \_\_\_\_\_

If needed

Electrical Hookup \_\_\_\_\_

**All entries must be mailed by Friday, Sept. 3rd or faxed by Monday, September 6th to avoid the Late Fee. Riders must pick up their number before the show starts.**

**MEMBERSHIP FORM MUST BE ATTACHED**

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**FORM AND COPY OF HORSE PAPERS MUST BE ATTACHED**

**MAKE CHECKS PAYABLE TO: ARCHER CO. 4-H HORSE CLUB**

Check # \_\_\_\_\_ CK amount \_\_\_\_\_ Cash \_\_\_\_\_

**\*Attention Novice riders\***

\_\_\_\_\_ Mark here if first SHOT show

Total amount due: \_\_\_\_\_

MAKE CHECKS PAYABLE TO: ARCHER CO. 4-H HORSE CLUB

**Send entries to: SHOT office at 3301 North 3rd, Abilene, TX, 79603, Fax: 325-672-6206 or email to asha-shot@att.net**