

VIRGINIA ARABIAN HORSE ASSOCIATION AWARDS PROGRAM

ENTRY FORM FOR YEAR: _____

Name of Horse: _____ Arabian: Half-Arabian:

Registration #: _____ Date Foaled: _____

Mare: Gelding: Stallion:

Name of Owner: _____ Farm Name: _____

Address of Owner: _____

Telephone Number: _____ E-mail: _____

Please check the division(s) you wish to enter:

- Halter/Sport Horse In-Hand
- Sport Horse Under Saddle/Sport Horse Show Hack
- Western Pleasure
- Hunter Pleasure
- Hunter/Jumper
- English Pleasure/Country English Pleasure/Park/Driving
- Dressage
- Western Dressage
- Working Western (Trail, Reining, Ranch Riding, Working Cow)
- Specialty (Sidesaddle, Native Costume, English Show Hack)
- Endurance
- Adult Amateur
- Youth
- Versatility
- Lewisfield

Name of Adult Amateur: _____ Date of Birth: _____

Name of Youth: _____ Date of Birth: _____

(Enter Adult Amateur or Youth only once if entering more than one horse.)

Total Divisions Entered: _____ X \$10.00 per division = Total Amount Due: \$ _____

Send to: Kimberly Graves
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