## 2024 World Championship Appaloosa Show for Equestrians with Disabilities

## ENTRY FORM - ONE PER EXHIBITOR

Exhibitor's Name:			Age (as of 1/1/24) - (min 8 years old)		ApHC Membership Number:		
Exhibitor's Riding Center:			Email Address for Riding Center Contact:				
			•				
Exhib	pitor's Address/City/State/Zip:						
Disability: Mark one		Name/Phone Number for Exhibitor's Representative:					
	Cognitive Only				ENTRY DEADLINE: October 7, 202	.4	
	Physical Only	Number of Supports (circle one)>	0 1 2 3		Must be received by ApHC with all fees.		
ш	Cognitive & Physical	Wheelchair dependent (circle one)>	Yes No		Mail or fax entries to:		
Divis	ons: Mark all that apply				ApHC, 2720 W Pullman Rd, Moscow ID 8 208.882.8150 (fax) 208.882.5578 (pl		
	Supported Walk	Veterans Supported Walk			email entries to: showsecretary@appaloe		
	Independent Walk	Veterans Independent Walk			* NSBA dual-approved - if entered in NSB		
	Supported Walk, Trot/Jog	eterans Independent Walk, Trot/Jog			portion, exhibitor must be NSBA current		
	Independent Walk, Trot/Jog	eterans Independent Walk, Trot/Jog, Canter/Lope			member and pay applicable fees per class		
	Independent Walk, Trot/Jog, Canter/Lope			Horses MUST be registered with NSB	A.		
	CLASSES	Harra Nama (usa rasistarad namas urban anniisabla)	Breed of Horse	Desistration Number	Owner's Name	NSBA	
Ī		Horse Name (use registered names when applicable)	Breed of Horse	Registration Number	Owner's Name	Y or N	
$\vdash$	Trail, Supported W/J*				+	_	
	Trail, Veterans W/J*				<del> </del>		
W003	Trail, Independent Walk-Only*						
W004	Trail, Supported Walk-Only*						
W001	Trail, Independent W/J*						
W005	Trail, Independent W/J/L*						
W010	Showmanship Level 1* (wheelchair)						
W011	Showmanship Level 2* (walk only)						
W012	Showmanship Level 3* (walk/jog/trot)						
W015	Horsemanship/Equitation, Veterans Walk (Independent/Supported)*						
W018	Horsemanship/Equitation, Supported Walk-Only*						
W017	Horsemanship/Equitation, Independent Walk-Only*						
W022	Western Pleasure, Independent W/J*						
W016	Western Horsemanship, Supported W/J*						
W021	Western Horsemanship, Veterans Independent W/J*						
W019	Western Horsemanship, Independent W/J*						
W020	Western Horsemanship, Independent W/J/L*						
W023	Western Horsemanship, Veterans Independent W/J/L*						
W025	English Equitation, Independent W/T*						
W026	Western Pleasure, Independent W/J/L						
FEES:	FEES: Checks payable to Appaloosa Horse Club or charge my (circle one) VISA MasterCard Discover American Ex Cardholder Name:						
	\$3/class for NSBA dual-approved classes (optional)		Card Number:				
CHEC	CKLIST:	Total Amount Due:	Cara Hamber.				
	Please include a completed and signed Release of Liability and In		Cardholder Signature:		Exp. Date C\	VV Code:	
Please include a completed and signed Medical Diagnosis Form (REQUIRED)							
Veteran's Service Branch & Rank:  STALL RESERVATION DEADLINE - October 4, 2						October 4 2024	
	Teteran 5 Service Branen & Rank.			_	T LE RESERVATION DEADERNE	- 110001 7, 2027	