## 2025 World Championship Appaloosa Show for Equestrians with Disabilities

## ENTRY FORM - ONE PER EXHIBITOR

Exhibitor's Name:			Age (as of 1/1/25) - (min 8 years old)		ApHC Membership Number:		
Exhibitor's Riding Center:			Email Address for Riding Center Contact:				
Exhibitor's Address/City/State/Zip:							
Disability: Mark one		Name/Phone Number for Exhibitor's Representative:					
	Cognitive Only				ENTRY DEADLINE: October 3	3, 2025	
	Physical Only	Number of Supports (circle one)>	0 1 2 3		Must be received by ApHC with al	I fees.	
Cognitive & Physical		Wheelchair dependent (circle one)>	Yes No		Mail or email entries to:  ApHC, 530 S. Asbury St., STE 3, Moscow ID 83843		
Divis	ions: Mark all that apply				208.882.5578 (phone)		
	Supported Walk	Veterans Supported Walk			email entries to: showsecretary@	appaloosa.com	
	Independent Walk	Veterans Independent Walk			* NSBA dual-approved - if entered		
	Supported Walk, Trot/Jog	Veterans Independent Walk, Trot/Jog			portion, exhibitor must be NSBA o		
	Independent Walk, Trot/Jog Independent Walk, Trot/Jog, Canter/Lope	Veterans Independent Walk, Trot/Jog, Canter/Lope			member and pay applicable fees p Horses MUST be registered wit		
independent Hally Holytog, cancely espe						NSBA	
	CLASSES	Horse Name (use registered names when applicable)	Breed of Horse	Registration Number	Owner's Name	Y or N	
W002	Trail, Supported W/J*						
W006	Trail, Veterans W/J*						
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*						
	English Equitation, Independent W/T*						
W026	Western Pleasure, Independent W/J/L						
FEES:	S: 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	KLIST:	Total Amount Due:					
					CVV Code:		
	Please include a completed and signed Medical Diagnosis Form (	REQUIRED)	Cardholder Address:				
	Cardholder Address:  STALL RESERVATION DEADLINE - October 1, 2025						
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