

\_\_\_\_\_  
Exhibitor Number

PLACING \_\_\_\_\_

\_\_\_\_\_  
Class Number

TIME \_\_\_\_\_

Class Name: \_\_\_\_\_ \*

\*Open Pleasure classes-Please Circle One: Western or English

Exhibitor Name: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

Horse's Name: \_\_\_\_\_

**DOUBLE ENTRY: My Partner is.....**

NAME: \_\_\_\_\_

NUMBER: \_\_\_\_\_

HORSE: \_\_\_\_\_

***DCHA, members and affiliated clubs will not be held responsible for any injury, theft, or damages incurred to rider or horse while participating or attending events on these premises.***

Signature (parent/guardian must sign for minor): \_\_\_\_\_

\_\_\_\_\_  
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