



PERFORMANCE FUTURITY ENROLLMENT FORM

Current AHA Membership with Competition Card is required for participation. Horses enrolled MUST be registered with either the Arabian Horse Association or the Canadian Arabian Horse Registries. Refer to the Region 4 AHA website for specific rules, regulations and deadlines, or contact the futurity chairperson. One horse per enrollment form. You may enter as many classes as you wish.

HORSE INFORMATION

Please check one: Arabian Half-Arabian Anglo-Arabian
 Registration # _____ Horse Name: _____

OWNER INFORMATION

AHA Membership# _____ Name _____
 Address _____ E-Mail _____
 City _____ State _____ Zip _____
 Home# _____ Work# _____ Fax# _____

In making this application, I declare that I am a current AHA member and I hereby subject myself to and agree to be bound by all the provisions of the Articles of Incorporation, Bylaws, Rules and Regulations of the Arabian Horse Association, Region 4 and the Performance Futurity Program as they now exist or may from time to time be amended, knowledge of which I now have or will immediately acquire.

Signature(s) _____ Date _____

ENROLLMENT FEE

Postmark Date	Paid in Full	-or-	1 st Payment	2 nd Payment	Number of classes times fee per class
Prior to April 1st:	\$300		\$150	\$150	_____
April 2nd ^h to May 19th	\$350*		\$200*	\$150	_____
May 19th	\$350*				_____
May 20 th to close of post entries	\$500				_____
				Total Amount Due:	_____

(Note: payments do not include show fees) *Late Fee Applied

DECLARATION OF CLASSES

It is recommended but not necessary to declare a class with payments. You may not change classes after your show entries have been processed.

- | | | |
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| <u>3, 4 & 5 year old horses</u> | <input type="checkbox"/> Working Cow Horse | <input type="checkbox"/> Reining |
| <u>3 & 4 year old horses</u> | <input type="checkbox"/> Country/English Pleasure | <input type="checkbox"/> Western Pleasure |
| | <input type="checkbox"/> Hunter Pleasure | |
| <u>4 & 5 year old horses</u> | <input type="checkbox"/> Hunter Pleasure AOTR | <input type="checkbox"/> Western Pleasure AOTR |

MAIL ENROLLMENT FORM AND PAYMENT TO
 Connie Chapman, Region 4 AHA Show Treasurer
 PO Box 274, Creswell, OR 97426
 (541) 521-8923 – region4showtreasurer@gmail.com