

Kick-Off Arizona AMHA Show

April 11, 2025

Farm Name: _____

Owner Name: _____

Address: _____

City, State, Zip _____

Phone &
Email _____

I certify that I am a Youth or Amateur as required by the Rules of AMHA.

1 _____ AMHR# _____

2 _____ AMHR# _____

3 _____ AMHR# _____

4 _____ AMHR# _____

Youth Must provide Date of Birth – Age group determined by Age on January 1st of current year.

I hereby enter miniature horse(s) in the classes below. In entering the horse(s) in participation in such events and in making use of property privileges, I will abide and be bound by all rules and regulations. I hereby hold harmless AMHR, MHAA, West World of Scottsdale, the show manager, show secretary, show organizers, sponsors or sponsor management from any loss, damage or injury to any person or property resulting from such entry, participation or use of such property or privileges.

Exhibitor Signature: _____

Parent or Guardian (for Youth Exhibitor) _____

Office Use Entry#	Office Use Height	Registered Name of Horse	Reg. No.	Sex	DOB	Registered Owner

Exhibitor _____

Exhibitor _____

Class# (One class number per square)

Class#

--	--	--	--	--	--

--	--	--	--	--	--

--	--	--	--	--	--	--

Exhibitor _____

Exhibitor _____

Class #

Class#

--	--	--	--	--	--

--	--	--	--	--	--

--	--	--	--	--	--	--

Exhibitor _____

Exhibitor _____

Class #

Class#

--	--	--	--	--	--

--	--	--	--	--	--

--	--	--	--	--	--	--

Exhibitor _____

Exhibitor _____

Class #

Class#

--	--	--	--	--	--

--	--	--	--	--	--

--	--	--	--	--	--	--	--

Exhibitor _____

Exhibitor _____

Class # _____

Class# _____

--	--	--	--	--

--	--	--	--	--

THIS FORM MAY BE REPRODUCED and MUST BE SIGNED

This show is approved by and conducted under the rules of the American Miniature Horse Association, Alvarado, TX. All entered horses must be registered with AMHA. Youth/Amateur Exhibitors must provide their Current (2025) AMHA Youth/Amateur number in the space provided on the front of the entry blank.

The following must be enclosed with submitted entries:

1. Copy of each horse's Registration Papers
2. Copy of Current (2025) Youth/Amateur Card
3. Check for monies due. Make checks payable to **MHAA**
4. **Paypal payments** go to: **mhaaemail20@gmail.com** (Mary Ronek) Use Friends & Family.

ENTRIES POSTMARKED AFTER SATURDAY, MARCH 15, 2025 WILL BE CHARGED \$20.00. FLAT FEES ARE PRE-ENTRY ONLY.

ENTRIES ARE TO BE SENT TO: Laura Mullen, 705 Westland Drive, Greensboro, NC 27410. Inquiries can be made at 607-769-6743, by email at winectry@aol.com.

COMPLETE THE FOLLOWING

ENTRIES

OPEN/AMATEUR CLASSES _____ @ \$25.00 Per Class \$ _____

FLAT FEE (10 class limit) _____ @ \$200.00 Per Horse \$ _____
(Pre-Entry Only)

FLAT FEES ARE PRE-ENTRY ONLY. AFTER THE PRE-ENTRY DATES, REGULAR CLASS FEES APPLY. FLAT FEES ARE PER HORSE.

YOUTH CLASSES _____ @ \$15.00 per Youth Class \$ _____

SPECIAL NEEDS CLASSES _____ @ \$15.00 per Special Needs Class \$ _____

OFFICE FEE (Includes \$3 AMHA Fee) _____ @ \$20.00 Per Horse \$ _____

TIE-OUT FEE (For horses not stalled) _____ @ \$20.00 Per Horse \$ _____

LATE FEE FOR ENTRIES AFTER 3/15/25 _____ @ \$20.00 Per Horse \$ _____

STALLS INCLUDE 2 BAGS OF SHAVINGS PER STALL. NO OUTSIDE SHAVINGS MAY BE BROUGHT ONTO THE GROUNDS.

SELECT YOUR OPTION:

STALLS FOR 3 days _____ stalls @ \$125.00 \$ _____

STALLS FOR 5 days (Wed-Sun) _____ stalls @ \$175.00 \$ _____

EARLY ARRIVALS/LAYOVERS/EXTRA DAY _____ stalls @ \$25.00 \$ _____

EXTRA SHAVINGS Purchase by calling 480-312-6802 ext. 2

TOTAL ENTRY & STALL FEES \$ _____

PLEASE STALL ME NEAR _____

I plan to arrive (Date and approximate time):

In case of emergency I can be reached at (phone) _____ Hotel/Room _____

Please note any special requests here:
