

VIRGINIA ARABIAN HORSE ASSOCIATION

AWARDS ENTRY FORM FOR YEAR_____

Name of Horse_____ Reg. #_____

Arabian___ Half Arabian___ Date Foaled_____ Mare___ Gelding___ Stallion___

Name of Owner_____

Address of Owner_____

Telephone Number_____ E-mail_____

Check divisions you wish to enter:

- Lewisfield_____
- Versatility_____
- Carriage Driving_____
- Country/English Pleasure/Park/Driving_____
- Dressage_____
- Halter_____
- Hunter/Jumper_____
- Hunter Pleasure_____
- Native Costume_____
- Show Hack_____
- Side Saddle_____
- Sport Horse In Hand_____
- Sport Horse Under Saddle_____
- Working Western/Trail_____
- Western Pleasure_____
- Adult Amateur_____
- Youth_____

Total Divisions Entered_____

X \$10.00

Total Amount Due \$_____

Name of Amateur_____ Date of birth_____

Name of Youth_____ Date of birth_____

(Enter amateur or youth only once if entering more than one horse.)

Send to: Priscilla Goodwin, 2813 Sterling Point Dr., Portsmouth, VA 23703