

LATE Entry Form

|                                  |         |  |
|----------------------------------|---------|--|
| Utah POAC Show Entry / JUNE 2024 | NUMBER: |  |
|----------------------------------|---------|--|

|                          |  |                         |  |
|--------------------------|--|-------------------------|--|
| Exhibitor Name:          |  | Horse Registered Name:  |  |
| Exhibitor Date of Birth: |  | Registration#:          |  |
| Exhibitor Age Group:     |  | National POAC Member #: |  |
| Mailing Address:         |  | Horse/Pony Gender:      |  |
| City:                    |  | Year Foaled:            |  |
| State, Zip:              |  | Horse Owner:            |  |
| Phone:                   |  |                         |  |
| Email:                   |  |                         |  |

Classes Entered:(Circle the class number)

|  |
|--|
| 1    3   4   5            8   9   10   11   12            15   16            18   19   20   21 |
| 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48                     |
| 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75               |
| 76 77 78 79  |
| 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102                        |

FEES:

|  |  |
|--|--|
| Total Number of Enter Classes: (\$7 per class) |  |
| Office Fee:                                    |  |
| National POAC Fee:                             |  |
| Total Amount Due:                              |  |

I agree that such entries are made at my own risk and subject to the rules of this show, and of the Pony of the Americas Club, Inc., and I agree, for myself and my representatives to be bound thereby. I further agree to assume and accept full risk of injury or damage to property or myself, which may be sustained at the show. I further waive any cause of action that I might or could have by reason of said damages to myself, my family, or property as against the grounds owner, the POAC, Inc., the host state (Utah POA), or any of the officers, directors, or members of said associations. I further agree that the show manager has the right to interpret all questions or conditions in regard to dispute regarding interpretations of the proper color or height to show. No entry fees will be returned except by proper official certificate of illness of pony or rider by veterinarian or physician. This will serve as my consent of children of minor age to enter this show. I verify that all information that I have supplied on this form is correct and complete. I have read and understand the show rules and have completed all necessary designation forms that are required for this entry.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of rider or authorized guardian if under 18