

## APHA ENTRY FORM

**REQUIRED: Include a copy of horse registration papers, coggins and trainer, owner & exhibitor APHA Competition Membership cards, if applicable**

Autumn Classic  
PO Box 70273  
Albany, GA 31708  
[autumnclassic1985@gmail.com](mailto:autumnclassic1985@gmail.com)  
[RingRadar.com](http://RingRadar.com)

|  |           |                    |  |   |  |              |  |              |  |
|--|-----------|--------------------|--|---|--|--------------|--|--------------|--|
| <b>Horse's Name</b>  |           | <b>APHA Reg No</b> |  | <b>DOB MM/DD/YY</b>                           |  | <b>Sex</b>   |  | <b>Color</b> |  |
| Breed  |           | WDAA Member #      |  | WDAA Horse ID #                               |  |              |  |              |  |
| <b>Rider 1</b>   | Class #   |                    |  |   |  |              |  |              |  |
|  | Class Fee |                    |  |   |  |              |  |              |  |
| <b>Name</b>  |           |                    |  | <b>DOB MM/DD/YY</b>                           |  |              |  |              |  |
| <b>APHA #</b>  |           |                    |  | Youth Relationship to Horse Owner             |  |              |  |              |  |
| <b>Address</b>   |           |                    |  | <b>City</b>                                   |  | <b>State</b> |  | <b>Zip</b>   |  |
| <b>Rider 2</b>   | Class #   |                    |  |   |  |              |  |              |  |
|  | Class Fee |                    |  |   |  |              |  |              |  |
| <b>Name</b>  |           |                    |  | <b>DOB MM/DD/YY</b>                           |  |              |  |              |  |
| <b>APHA #</b>  |           |                    |  | Youth Relationship to Horse Owner             |  |              |  |              |  |
| <b>Address</b>   |           |                    |  | <b>City</b>                                   |  | <b>State</b> |  | <b>Zip</b>   |  |
| <b>OWNER INFORMATION</b> Owner name as it appears on registration papers/purchase contract<br>Name _____<br>APHA # _____ Farm/Ranch _____<br>Address _____ Phone _____<br>City _____ St _____ Zip _____<br>Email _____<br><br><b>TRAINER INFORMATION</b> must be filled out, if no trainer, owner may write in "same"<br>Name _____<br>APHA # _____ Farm/Ranch _____<br>Address _____ Phone _____<br>City _____ St _____ Zip _____<br>Email _____<br><br>Stable With _____ |           |                    |  | # Class Fee @ \$12.00                         |  | \$           |  |              |  |
|  |           |                    |  | # Class Fee @ \$15.00                         |  | \$           |  |              |  |
|  |           |                    |  | # Class Fee @ \$20.00                         |  | \$           |  |              |  |
|  |           |                    |  | # Class Fee @ \$25.00                         |  | \$           |  |              |  |
|  |           |                    |  | # Class Fee @ \$30.00                         |  | \$           |  |              |  |
|  |           |                    |  | 1 Office Fee @ \$30.00/Horse                  |  | \$           |  | 30.00        |  |
|  |           |                    |  | 1 EMS FEE @ \$10.00/Entry                     |  | \$           |  | 10.00        |  |
|  |           |                    |  | APHA Membership Fee                           |  | \$           |  |              |  |
|  |           |                    |  | 12 mos- \$89; Youth 12 mos \$39               |  | \$           |  |              |  |
|  |           |                    |  | 1 APHA Processing Fee                         |  | \$           |  | 3.00         |  |
| # Tack Stall @ \$100.00  |           | \$                 |  |   |  |              |  |              |  |
| # Horse Stall \$100.00   |           | \$                 |  |   |  |              |  |              |  |
| OR   |           |                    |  |   |  |              |  |              |  |
| Grounds Fee \$30.00  |           | \$                 |  |   |  |              |  |              |  |
| If not stalling  |           |                    |  |   |  |              |  |              |  |
| Post Entry @ \$20.00   |           | \$                 |  |   |  |              |  |              |  |
| per horse after Nov 1, 2026  |           |                    |  |   |  |              |  |              |  |
| <b>Credit/Debit Card Information:</b>  |           |                    |  | <b>Total Enclosed Fees</b>                    |  | \$ _____     |  |              |  |
| Name on Card: _____  |           |                    |  | <b>Make Checks Payable to: Autumn Classic</b> |  |              |  |              |  |
| Card Number: _____   |           |                    |  |   |  |              |  |              |  |
| Exp Date: _____ Zip Code: _____ CRV #: _____   |           |                    |  |   |  |              |  |              |  |

**PLEASE READ AND COMPLETE RELEASE**

**Release of Liability: ASSUMPTION OF RISK, RELEASE AND HOLD HARMLESS AGREEMENT:** I agree as follows by signing below: I choose for myself (or as parent or guardian to permit a junior exhibitor) to participate voluntarily in this competition. I AM FULLY AWARE AND ACKNOWLEDGE THAT PARTICIPATION IN THIS COMPETITION INVOLVES SERIOUS RISKS OF HARM, INCLUDING PERSONAL INJURIES, DEATH AND DAMAGES TO PROPERTY. I ASSUME RISKS OF HARM AND DAMAGES TO ME, MY HORSE AND PROPERTY. I hereby RELEASE, INDEMNIFY AND HOLD HARMLESS (including from damages, costs and attorney fees) American Paint Horse Association, the Competition, the facilities, and all of their respective Agents, Servants, Employees and Volunteers (Collectively the "Released Parties") from any claims, relating to the competition and my participation in the competition, belonging to me, or legally caused by me or my horse, for any kind of damages, losses, or injuries to myself, other persons, horses or property to the fullest extent permitted by law. I further agree to adhere to the rules set forth in the American Paint Horse Association and the Autumn Classic Charity Show rules & Guidelines and understand all decisions made by the judge are deemed final and can not be protested.

|  |             |
|--|-------------|
| <b>Owner **Mandatory-No Junior Signatures</b>                                | Signature X |
| <b>Trainer or Custodian of horse @ show **Mandatory-No Junior Signatures</b> | Signature X |
| <b>**Adult Owner must sign if no trainer</b>                                 | Signature X |
| <b>Rider 1 **Mandatory-No Junior Signatures</b>                              | Signature X |
| <b>Rider 2 **Mandatory-No Junior Signatures</b>                              | Signature X |

**\*Entries must be postmarked no later than November 1, 2026**

|                    |               |                       |                     |
|--------------------|---------------|-----------------------|---------------------|
| <b>OFFICE USE:</b> | Check # _____ | Amount of Check _____ | Name on Check _____ |
|--------------------|---------------|-----------------------|---------------------|