## **2023** All American Quarter Horse Congress Collegiate Horse Judging Contest Entry Form

## **ENTRIES MUST BE POST-MARKED BY SEPTEMBER 1, 2023**

	vision:	□ Senior College		□ Junior College □ Limited
	am Name:			
	ach Name:			
	ach Address:			
				Zip Code:
Te	lephone Number:			E-mail:
	I hereby approve the part	icipation o	f the above team	and declare that they are eligible.
Со	ach Name (please print):			Signature:
Contestant Information				Payment Information
1.	Name:			Team Entry Fee \$200 \$
	Birth Date:			
	City:			
2.	Name:			\$50 Late Fee (for entries post-marked Sep 2-Oct 1) \$
	Birth Date:			
	Address:			Total Fees \$
	City:	State:	Zip:	3% Convenience Fee for Credit Card Payment \$
				Total Amount Charged \$
3.	Name:			
	Birth Date:		Age:	Payment Method (please check one):
	Address:			Check/Money Order   Visa   MasterCard
	City:	State: _	Zip:	Make checks payable to: Ohio Quarter Horse Association
4.	Name:			Name on Card:
	Birth Date:		Age:	
	Address:			Expiration Date: CVV#:
	City:	State: _	Zip:	Signature:
5.	Name:			Mail entry form to:
	Birth Date:		Age:	AAQHC Collegiate Horse Judging Contest
	A al al a a a a .			222 Aminos I Caianasa Buildina
	City:	State: _	Zip:	2029 Fyffe Court
				Columbus, OH 43210
				or E-Mail to: cole.436@osu.edu