



MWRHA EXTRAVAGANZA
 NRHA - AQHA & MWRHA Affiliate Approved
 August 16-18, 2019

ENTRY _____

Account Name: _____

Trainer: _____

NRHA Horse's Name _____

Comp Lic# _____ S G M

Horse's Barn Name _____

AQHA # _____

Owners Name _____

NRHA# _____ G P NP Y L

AQHA# _____ O AM NA Y L

Rider's Name _____

NRHA# _____ G P NP Y L

****NO ADDRESS-NO PAYCHECK**** PAYEE: Rider Owner

AQHA# _____ O AM NA Y L

Address _____ City _____ St _____ Zip _____ Phone _____

Friday Aug 16 Start 3pm

1st 1340* AQHA Open (JP) 15 10 _____ AQHA# _____ 6
 1700 Nov Hor Op L1 (500) 50 30 _____ NRHA# _____
 1750 Nov Hor Op L2 (500) 50 30 _____
 1800 Nov Hor NP L1 (500) 50 30 _____
 1850 Nov Hor NP L2 (500) 50 30 _____

2nd 9600 Green Horse (JP) 40 20 _____
 10001 Green Level 2 (JP) 30 0 _____ NRHA # _____ 13
 10002 Green Level 1 (JP) 30 _____

3rd 9804 All Breed-Age RR (JP) 25 25 _____ AQHA # _____ 8

4th 1430* AQHA Open RR (JP) 30 20 _____ AQHA # _____ 2

5th 2430* AQHA Amt R R (JP) 30 20 _____ AQHA# _____ 2

6th 4430* AQHA Yth RR (JP) 30 20 _____ AQHA# _____ 2

Saturday Aug 17 Start 8 am

1st 5300 Rookie L1 (JP) 20 20 _____ NRHA# _____ 7
 5301 PT Rookie (JP) 20 20 _____
 5310 Rookie L2 (\$200) 20 20 _____

2nd 1100 Open (1000) 100 50 _____ NRHA# _____ 10
 1200 Int Open (500) 50 30 _____
 1301 Ltd Open (250) 25 25 _____
 1340** AQHA Open (JP) 15 10 _____ AQHA# _____
 1350 Rookie Prof (JP) 25 25 _____

3rd 10201 Ride N Slide NP L2 (JP) 20 20 _____ NRHA# _____ 8

4th 1400 Non Pro (\$1000) 100 50 _____ NRHA# _____ 9
 1500 Int Non Pro (\$500) 50 30 _____
 1600 Ltd Non Pro (\$250) 25 25 _____
 1650 PT Non Pro (JP) 20 10 _____
 2340* AQHA Am (JP) 15 10 _____ AQHA# _____

5th 3100 Youth 13 & Under 10 0 _____ NRHA# _____ 5
 3200 Youth 14-18 10 _____
 3300 Rookie Yth 10 _____
 4340* AQHA Yth 10 _____ AQHA # _____

NRHA HORSE NAME _____

ENTRY _____

Saturday Continued

6 th	3500	<input type="checkbox"/>	10 & < Short Stirrup	10	0	_____	NRHA# _____	A-14
7 th	9919	<input type="checkbox"/>	Lead Line-Pee Wee	0	0	_____		
8 th	1700	<input type="checkbox"/>	Nov Hor Op L1 (500)	50	30	_____	NRHA# _____	7
	1750	<input type="checkbox"/>	Nov Hor Op L2 (500)	50	30			
	1800	<input type="checkbox"/>	Nov Hor NP L1 (500)	50	30			
	1850	<input type="checkbox"/>	Nov Hor NP L2 (500)	50	30			

Sunday Aug 18 Start 8:00 am

1 st	9600	<input type="checkbox"/>	Green Horse (JP)	40	20	_____	NRHA # _____	1
	10001	<input type="checkbox"/>	Green Level 2 (JP)	30	0			
	10002	<input type="checkbox"/>	Green Level 1 (JP)	30				
2 nd	1400	<input type="checkbox"/>	Non Pro (\$500)	50	30	_____	NRHA# _____	13
	1500	<input type="checkbox"/>	Int Non Pro (\$500)	50	30			
	1600	<input type="checkbox"/>	Ltd Non Pro (\$250)	25	25			
	1650	<input type="checkbox"/>	PT Non Pro (JP)	20	10			
	2340**	<input type="checkbox"/>	AQHA Am (JP)	15	10	_____	AQHA# _____	
3 rd	3100	<input type="checkbox"/>	Youth 13 & Under	10	0	_____	NRHA# _____	13
	3200	<input type="checkbox"/>	Youth 14-18	10				
	3300	<input type="checkbox"/>	Rookie Yth	10				
	4340**	<input type="checkbox"/>	AQHA Yth	10		_____	AQHA # _____	
4 th	3500	<input type="checkbox"/>	10 & < Short Stirrup	10	0	_____	NRHA# _____	B-15
5 th	5300	<input type="checkbox"/>	Rookie L1 (JP)	20	20	_____	NRHA# _____	8
	5301	<input type="checkbox"/>	PT Rookie (JP)	20	20			
	5310	<input type="checkbox"/>	Rookie L2 (\$200)	20	20			
6 th	1100	<input type="checkbox"/>	Open (500)	50	30	_____	NRHA# _____	11
	1200	<input type="checkbox"/>	Int Open (500)	50	30			
	1301	<input type="checkbox"/>	Ltd Open (250)	25	25			
	1350	<input type="checkbox"/>	Rookie Prof (JP)	25	25			

FOR OFFICE USE ONLY!!!!

BELOW THIS LINE

Entry Fees Total	_____	_____
Judges Fees Total	_____	_____
Office Fee \$20 per Horse	_____	_____
Video fee \$12 per Run x _____	_____	_____
_____ Stalls x \$100 (Th-S)	_____	_____
_____ Early Arrival Stall (Wed) x \$10	_____	_____
Shavings _____ bags x \$8	_____	_____
_____ RV _____ nights x \$30	_____	_____
PWU _____ x \$25/run	_____	_____
AQHA Drug 1 _____ 2 _____ X\$6	_____	_____
NRHA Drug Fee \$7 per Horse	_____	_____
\$30 failure to close fee by 2pm on 8/18	_____	_____
5% conv fee for CC	_____	_____

Checks Payable to: MWRHA

CH # _____
 CASH _____ CC _____
 AMT \$ _____

FINAL TOTAL \$ _____

Signature: _____

Date _____, 2019

CC# _____	Zip Code _____
CVC _____	Exp Date _____