## IQHA 3rd District Open Competition Affiliate Program Enrollment Form

Send to: IQHA 3rd District c/o Lori Mennenga 112 250th St. Meservey, Iowa 50457 641-494-7892

Horse Name:		Registration NoAQHA Membership No.:		
Owner Name:				
Owner Address:		City:	State:Zip:	
Phone()	E-ma	il		
All Owners and Exhibi	tors of the above listed AQHA	horse must be current AQHA a	nd IQHA 3rd District members.	
1) 12 & Under	2) 13-18	3) 19 & Over	4) Select (50 & Over)	
Exhibitor	AQHA Me	mber No. Relationship	Age Group	
	'	'		
IQHA 3rd District Op	en Competition Affiliate pro	gram. I understand that I mus	•	
letter prior to compe	eting in any event that I wish	my points to be counted or I	forfeit any point won therein.	
Print Name:		Print Name:Date:		