

Colorado Breeders Challenge Futurity CLASS ENTRY FORM In conjunction with CAHC One Day Show at Latigo, Saturday August 30, 2025 Latigo Heritage Equestrian Center, Elbert, CO

Mail Entries to: CABA SHOW SECETARY

c/o Liz Wheeler 6786 SE Cherry Creek Rd Franktown, CO 80116

Make checks payable to: Colorado Arabian Breeders Alliance (CABA) Note: There will be a \$50 fee for any checks returned or cards declined

COLORADO BREEDERS CHALLENGE (A CABA Presentation)

EXP DATE ______ SECURITY CODE ______ BILLING ZIP __

HALTER FUTURITY ENTRIES CLOSE AUGUST 23, 2025: All er					
Handler/Rider and contain the correct fees. Enclose copies copy of the pending paperwork with entry.	of horse's registrati	on papers (both sid	les). If registra	tion is pending (\	Weanling), send
CLASSES TO BE HELD DURING THE SESSION ON SATURDAY	AUGUST 30, 2025.				
COMPLETE A SEPARATE ENTRY		HORSE AND/OR C	LASS ENTERE	<mark>D</mark>	
NAME OF ENTRY / REGISTRATION#		DOB	SEX	COLOR	
SIRE / REGISTRATION#	DAM / REGIS	TRATION#			
OWNER & STATE OF RESIDENCE	HANDLER				
I hereby affirm that I meet the criteria of an "amateur" as	defined by USEF (re	fer to the current l	JSEF rule book	for definition).	
(Handler Signature) x					
**CLASS: (Check Box for Appropriate class you	are entering)				
[] PB Weanling Fillies [] PB Weanling Colts/Geldir	•	eanling Fillies [] HA/AA We	anling Colts/Ge	eldings
[] PB Yearling Fillies [] PB Yearling Colts/Gelding				arling Colts/Gel	
[] PB 2 YR Old Fillies [] PB 2 YR Old Colts/Gelding	gs []HA/AA 2	YR Old Fillies [] HA/AA 2 Y	R Old Colts/Ge	ldings
[] PB 3 YR Old Fillies [] PB 3 YR Old Colts/Gelding	gs [] HA/AA 3 '	YR Old Fillies [] HA/AA 3 Y	R Old Colts/Ge	ldings
* Entry Fee: \$ 100.00			-		
**Halter Classes may be combined as de	•				<mark>how.</mark>
(GUARANTEED HALTER CLASS PURSE: \$200 X NUMB		TERED: SEE PAYB	ACK SCHEDU	LE IN RULES)	
Owner-As listed on horse registration paper	rs.				
Name:	Farm/Ranch_			 -	
Address:	_ City	State	Zi	p	
Phone: () Email: _					
Agent (IF APPLICABLE):					
Signature herein by owner/owner's agent at	tests that all in	formation is tru	ue and cori	rect.	
Owner/Agent:			Date:		
(Signature)					
CREDIT CARDS ACCEPTED (4% SURCHARGE): (AMERI			-		
NAME AS IT APPEARS ON CARD		C/C#			
BILLING ADDRESS					
SIGNATURE					