



I would like to enter the following horse and rider in the Youth Adult or Elite (check one) division of the Versatility Program:

Horse's Registered Name _____ Horse's Registration # _____

Owner's Name _____ Rider's Name _____

Address _____ Address _____

City, State, Zip _____ City, State, Zip _____

Telephone _____ Telephone _____

Email _____ Email _____

Signed _____ Date _____

\$25.00 participation fee • Paying by Check, Check # _____

Paying by Credit Card, Visa Mastercard, Expiration Date _____

Credit Card Account #

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Name on Credit Card _____ Billing Address _____

Telephone _____ Signature _____

Please send this entry form to:

TWHBEA

P.O. Box 286 Lewisburg, TN 37091

For more information please call 931-359-1574 or visit www.twhbea.com