

OVAHA RECREATIONAL RIDING PROGRAM ENTRY FORM

HORSE ENTRY INFORMATION (Copy of registration and lease papers (if applicable)
MUST accompany each entry)

BREED: (circle one) ARABIAN HALF-ARABIAN ANGLO-ARABIAN

Registration # _____

Name _____ (M) (G) (S)

Dam _____

Sire _____

RIDER ENTRY INFORMATION

Name _____ Phone _____

Address _____

E-Mail _____

City _____ State _____ Zip _____

Mail form to:

Marcia Doncaster
7627 Horseshoe Bend Rd.
Ludlow Falls OH 45339
(937) 698-6917

dawnkhato@aol.com