

www.qhal.lu



7, op der Klopp
L-6695 Mompach
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Association sans but lucratif Siege social Mompach

International Affiliate of the AQHA

7, op der Klopp
L-6695 Mompach

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Association sans but lucratif Siege social Mompach

International affiliate of the APHA

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RANCH SORTING CUP ***June 1st & 2nd 2013***

start at 10:00

@ Ecurie de la Pétrusse / Manège Biren
64,rue des Celtes
L-1318 Luxembourg / Merl
www.biren.lu

AQHA - Ranch Sorting Novice Amateur
AQHA - Ranch Sorting Amateur
AQHA - Ranch Sorting Open
WRAL - Ranch Sorting Amateur
WRAL - Ranch Sorting Open
WRAL - Ranch Sorting Beginner

Office Fee € 5.00 / Rider
6 Ride Limit / Horse
Fee Per Rider € 30.00 / Class

50% PayBack

2 Go Rounds - 10 Best Teams in Finals

All info on this flyer is subject to change.
Association has the right to limit entries due to cattle availability
&/or to make changes due to unforeseen circumstances.

This show is judged by: Rick Le May
according to the AQHA Rule Book

ENTRY FORM /TIME SHEET

Luxembourg / Merl

Please send or mail this Form to: QHAL asbl , 7, op der Klopp L-6695 Mompach, Fax 00352 729653
E-mail: qhal@tango.lu

HORSE NAME:		HORSE ID :			
RIDER NAME:		Year foaled:		Sex:	
PHONE NUMBER:					
EMAIL:					
CONTACT ADDRESS:					

General Rules

In AQHA classes 1 entry is allowed per horse in each class
The finals of all AQHA Ranch Sorting are not recognized by AQHA and not pointed. The 1st and 2nd Go Round are approved by AQHA and will be pointed as usual.
In WRAL (all breed) classes 2 entries are allowed per horse in each class
Maximum 6 entries per horse in all classes combined
All riders with a ranking of 6 and 7 in their home country are limited to enter only Open classes
The Beginner class is limited to riders without competition experience
The Captain of each team will complete and return the attached team entry form
Cattle will be marked by neck numbers!
A "Briefing" for all riders will be held by the judge and the organizing team 10 minutes before the show starts on Saturday
Any unnecessary roughness to cattle or horses or unsportsmanlike conduct may result in disqualification without refund of entry fees

Ranch Sorting Cup

!! CLASSES START AT 10:00 AM !!

Saturday June 1st 2013

	1st Go round			ENTRIES	AMOUNT
1	AQHA	Ranch Sorting (Goes are AQHA approved)	OPEN		
2	WRAL	Ranch Sorting	OPEN		
3	AQHA	Ranch Sorting (Goes are AQHA approved)	AMATEUR		
4	WRAL	Ranch Sorting	AMATEUR		
5	AQHA	Ranch Sorting (Goes are AQHA approved)	Novice Amateur		
6	WRAL	Ranch Sorting	BEGINNER		

Lunch Break

	2nd Go round				
7	AQHA	Ranch Sorting (Goes are AQHA approved)	OPEN		
8	WRAL	Ranch Sorting	OPEN		
9	AQHA	Ranch Sorting (Goes are AQHA approved)	AMATEUR		
10	WRAL	Ranch Sorting	AMATEUR		
11	AQHA	Ranch Sorting (Goes are AQHA approved)	Novice Amateur		
12	WRAL	Ranch Sorting	BEGINNER		

Sunday June 2nd 2013

	Finals				
13	WRAL	Ranch Sorting	BEGINNER		
14	AQHA	Ranch Sorting (Finals are not AQHA approved)	Novice Amateur		
15	WRAL	Ranch Sorting	AMATEUR		
16	AQHA	Ranch Sorting (Finals are not AQHA approved)	AMATEUR		
17	WRAL	Ranch Sorting	OPEN		
18	AQHA	Ranch Sorting (Finals are not AQHA approved)	OPEN		

Lunch Break

Awards presentation

WAIVER OF RESPONSIBILITY

I, the undersigned, agree that neither the show-management nor the owner of the arena accept any responsibility for accident, loss or damage to persons, horses or properties, how so ever caused and that I comply with the rules as stated in the showannouncement. With my binding signature I hereby confirm that I'll pay the expenses for a veterinary examination if such will be necessary and that the above mentioned horse is free of disease and covered by a liability insurance on the showday.

SIGNATURE:.....

TOTAL ENTRIES
OFFICE CHARGE

BOX
TOTAL DUE

Ranch Sorting Cup

June 1st and 2nd 2013
Luxembourg / Merl

Stalls are available from Friday May 31st 14:00 until June 2nd, the end of the show

Name:.....
Mobile:..... Email:.....

Name Horse	Sex	Name Owner	Amount

If possible, please place my stables next to

!!! NUMBER OF BOXES IS LIMITED !!!

Order of reservation of boxes will be the payment date:

!!! FIRST PAY, FIRST SERVED !!!

PLEASE PAY YOUR BOXES BY BANK TRANSFER:

QUARTER HORSE ASS'N Luxembourg, LU18 0141 0334 2150 0000
BIC code: CELLLULL ING Luxembourg S.A.

Regular Stall (only Straw bedding)
for WRAL/QHAL/PHAL members 35,00 Euro x=
for non-members 45,00 Euro x=
Total to be paid =

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

Date:..... Signature:.....

This form must be send or mailed to : QHAL asbl , 7, op der Klopp, L-6695 Mompach

TEL.: ++352 691 729653 Fax.: ++352 729653

E-Mail: qhal@tango.lu

TEAM ENTRY FORM
AQHA RANCH SORTING OPEN

Rider 1 (Team Captain)

Horse

Name	Name
Street	Breed
Zip / Town	Sex
Phone	Age
AQHA ID	AQHA ID

Rider 2

Horse

Name	Name
Street	Breed
Zip / Town	Sex
Phone	Age
AQHA ID	AQHA ID

DateSignature

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

TEAM ENTRY FORM

AQHA RANCH SORTING AMATEUR

Rider 1 (Team Captain)

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age
AQHA ID AQHA ID

Rider 2

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age
AQHA ID AQHA ID

Date Signature

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

TEAM ENTRY FORM
AQHA RANCH SORTING
Novice Amateur

Rider 1 (Team Captain)

Horse

Name	Name
Street	Breed
Zip / Town	Sex
Phone	Age.....
AQHA ID	AQHA ID

Rider 2

Horse

Name	Name
Street	Breed
Zip / Town	Sex
Phone	Age.....
AQHA ID	AQHA ID

DateSignature

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

TEAM ENTRY FORM

WRAL RANCH SORTING OPEN

Rider 1 (Team Captain)

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age

Rider 2

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age

Date Signature

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

TEAM ENTRY FORM

WRAL RANCH SORTING AMATEUR

Rider 1 (Team Captain)

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age

Rider 2

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age

Date Signature

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

TEAM ENTRY FORM

WRAL RANCH SORTING BEGINNER

Rider 1 (Team Captain)

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age.....

Rider 2

Horse

Name Name
Street Breed
Zip / Town Sex
Phone Age.....

Date Signature

I hereby certify that my horses are free of disease and vaccinated against influenza and that I have a liability accident insurance, discharging the organizers of any responsibility.

