

THE INSTITUTE
FOR THE DESERT ARABIAN HORSE

Drinkers of the Wind
Annual High-Point Award
Enrollment Form

***To register your horse, fill out this form and return it to the Award Secretary
Susan Mayo, 5493 Edwards Rd., Denton, Texas 76208.
Form must be signed by the owner.***

Horse

Registered Name: _____

Registration Number (circle one: AHA or CAHR) _____

Birth Date: _____

Sire: _____ Dam: _____

Owner

Name: _____

Mailing Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ email: _____

Rider/Driver (if different from owner) _____

Please describe the type of competitions you plan to enter

***I have read and agree to all the rules and terms of the award as described at
www.desertarabian.org***

Signature

Print Name

Date