

OCAP ENROLLMENT SHEET



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Horse Name: \_\_\_\_\_ Registration No.: \_\_\_\_\_
Owner Name(s): \_\_\_\_\_ Membership No.: \_\_\_\_\_
Owner Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Phone (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

All owners and exhibitors of the above listed Pinto must be current PtHA members.

Table with 3 columns: Exhibitor, PtHA Membership No., Relationship. Multiple empty rows for data entry.

I certify that the above information is correct and current. I have read and agree to abide by the rules of the PtHA Open Competition Activities Program as defined by the current PtHA Rule Book. I understand that I must possess my OCAP enrollment letter prior to competing in any OCAP event or forfeit any points won therein. For the points to count, the form must be postmarked within 30 days of the show.

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Please include \$35 annual enrollment fee with application.

Method of Payment: (US Funds) (Starting August 1, 2022 a 3% credit card transaction fee will be added)
\_\_Check \_\_Visa \_\_MasterCard \_\_Discover \_\_American Express Card No.: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV#: \_\_\_\_\_
Name on Card: \_\_\_\_\_ Signature of Card holder: \_\_\_\_\_