



**SOAR NEW ENROLLMENT**

7330 NW 23RD STREET • BETHANY, OK 73008  
(405) 491-0111 • FAX (405) 787-0773  
WWW.PINTO.ORG

Requirements:

1. Participants and Owner must be current PtHA Members.
2. Pintos must be permanently registered with PtHA.
3. Enrollment forms must be completed annually and submitted to PtHA with fee to report credits.

Reporting Credits:

1. Credits are earned by either logging time spent riding, driving, or working in-hand in a non-competition setting or by submitting points earned at non-PtHA shows (4-H, local horse clubs, or recognized associations)
2. Participants may not report credits for recreation and submit points for the same event.
3. Credits are awarded- Recreational time: 1 Hour= 1 Credit, Exhibition: 2 Points= 1 Credit
4. Double points are awarded for shows held by recognized associations, i.e. 1 Point= 1 Credit
5. Double Hours are awarded for time spent riding/driving in a national or state parks, grasslands or historic areas as recognized by the U.S. or Canadian National Parks Service.
6. Credits must be reported on PtHA SOAR Program Forms.

Horse Name: \_\_\_\_\_ Registration No.: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Membership No.: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Rider/Driver Name: \_\_\_\_\_ Membership No.: \_\_\_\_\_

Relationship to Owner:                      Owner                      Family Relation (on file)\*                      Leasee\*\*

\* Family Relationship Forms are available at no charge for immediate family members who show/ride/drive a family members equine.

\*\* Leases must be on file with the PtHA office if Rider/Driver is not family or Owner.

I certify that the above information is correct and current. I have read and agree to abide by the rules of the PtHA SOAR Program as defined by the current PtHA Rule Book. I understand that my enrollment must be completed annually in order to earn program credits.

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

Please include \$35 annual enrollment fee with application

Program Forms request:

\_\_\_\_\_ Exhibition Form

\_\_\_\_\_ Recreational Time Log

\_\_\_\_\_ Event Advertising Form

Method of Payment: (US Funds)	
<input type="checkbox"/> Check	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express
CardNo.: _____	Exp.Date: _____ CVV#: _____
Name on Card: _____	
Signature of Card holder: _____	