

Please feel free to fax this entry form to pre-register early, but no later than one day prior to the show, at 281-313-3479 or e-mail to deannaennis@windstream.net

WHIPPLE TREE FARM

ENTRY FORM

ONE RIDER PER ENTRY FORM

IF EXHIBITING MORE THAN ONE HORSE

EACH HORSE MUST BE ON SEPARATE FORM

(This form may be copied if needed to enter more than one horse.)

Rider Name _____ SJHSA Member (circle one) yes no

Rider Age _____ **IF APPLYING FOR MEMBERSHIP CHECK HERE

Trainer/Barn _____ Give separate check and application to show secretary

Coggins #: _____ Date: _____ Lab: _____

Rider #	Horse	Horse Owner	Classes

TO BE ELIGIBLE FOR SJHSA POINTS, THE RIDER MUST BE A MEMBER. MEMBERSHIP IS \$15.00 ANNUALLY (\$1.00 per horse). CHECK MADE PAYABLE TO SJHSA. OWNERS WITH HORSES ENTERED IN THE HUNTER/JUMPER DIVISIONS MUST ALSO BE MEMBERS.

This entry is an agreement that the person entered along with the Owner, lessee, trainer, manager, coach and horse: (1) that every Horse and rider is eligible as entered; (2) that the owner and any of his/her representatives will agree to the final decisions made by the management and hold the competition of SJHSA, Whipple Tree Farm, Dianne & Fred Gallatin, their officials, the management employees and agents harmless for any injury or loss suffered during or in connection with the competition, whether or not such injury or loss resulted, directly or indirectly from the negligent acts or omissions of said officials, employees, agents, the management, SJHSA, Whipple Tree Farm, or Dianne & Fred Gallatin.

PERMISSION FOR A MINOR TO SHOW MUST BE SIGNED IF THE RIDER IS UNDER 18 YEARS OF AGE. NUMBERS WILL NOT BE ISSUED UNTIL THIS FORM IS SIGNED.

To be completed by show secretary

Open Check _____

Stable Name _____

Entry Fee ___ @ \$15 = _____

Payment Due \$ _____

Check # _____

I hereby consent to the entry of _____ in this show and certify that I have read the above representations and statement and that I agree and accept responsibility for the participation of the minor noted above.

Signature of Parent/Guardian/Agent/Exhibitors: _____

Phone # _____ Address: _____

MAKE CHECKS PAYABLE TO: WHIPPLE TREE FARM