

Owner of Horse Signature: \_\_\_

## White Mountain HORSE SHOW ENTRY FORM

SHOW	NUMBER	

## 2024 Horse Show Dates

Circle Show Date: Pre-Entry Post Marked Date:			July 13 <sup>th</sup> July 9 <sup>th</sup>		•		August 4 <sup>th</sup> July 30 <sup>th</sup>		August 30th August 20 <sup>th</sup>				
Only or	ne Horse/Rider	Combinati	on per e	ntry form.									
Name of Horse:				Breed:					Age:	Sex:		Height	:
Exhibitor Name:		<u> </u>	Age:	Phone #			Email:						
Mailing Address:					City:				State	& Zip code:			
CLASS IN	TOP BOX PRICE IN	воттом во	x										
	ED WITH ENTRY:	O'c navah	alo to M	MDC						DO NO		UT!	
Make Checks & MO's payable to WMRC					Total Entry Fees X \$10 \$								
Include payment – Check, Cash or MO (signed blank check) Signature Below Exhibitor/ Parent				Total Championship class fees X \$15 \$									
Copy of Coggins/ Rabies-Dated within 12 months Stall Usage Fee - \$10.00 per stall					Post Entry One Time Fee \$10 (if late) \$								
Camper Fee - \$40 per hook up				NII V	Office Fee nonrefundable					\$	10		
Stall Cleaning Deposit Fee - \$20.00 per stall CASH ONLY  Mail Entries:					NLY	Stall Fee (\$10 day/ \$20 weekend)							
	Cathy Dorr					Camper Fee per camper \$40 x					\$		
1697 W. Lunenburg Rd Lunenburg VT 05906						<b> </b>		_	_				
						Tota	al Am	ount	Due:		\$ <sub>.</sub>		
Lial	bility W	aiver											
Riding club, injury, dama form is proc <b>All Dogs m</b> u	stand the inherent dange The WMRC Show Commit age, loss, or death to myse of of my acceptance of the list be on leash and must I	tee, The Lancaste elf, my minor child rules and regulat nave a rabies certi	er Fair Associat I, my horse, an ions of this sho ificate in posso	ion, their Director d my possessions, ow and the unders ession. May be a	s, Officials, Sp I agree that I tanding of the sked to prove	onsors, Mem have entered e above. Signa e vaccine stati	bers and Vo d the above ature(s) belo us. Tags do I	lunteers whil with understa ow indicate th not count!	e attending or anding of the r aat each of us	exhibiting in th ules of this show has read and un	is show; in the w. My signatur derstands the	event of e on the	
All Hors months	es must have Pro	of of Rabies	s Vaccine	s. Out of Sta	te horse	s must ha	ave proc	of of Neg	ative Cog	gins Test v	vithin 12		
	iders under 18 ye	ars of age a	are requir	ed to alway	s wear aı	n ASTM a	ipproved	d riding h	elmet wh	nile mount	ed***		
Exhibit	or Signature: _					Pare	ent/Guar	dian must	sign if ride	er is under 1	L8 years of	age	