



HORSE SHOW ENTRY FORM

SHOW NUMBER

2023 Horse Show Dates

Circle Show Date: June 25th July 23rd September 1st
Pre-Entry Post Marked Date: June 19th July 17th August 21st

Only one Horse/Rider Combination per entry form.

Name of Horse:		Breed:		Age:	Sex:	Height:
Exhibitor Name:		Age:	Phone #	Email:		
Mailing Address:			City:	State & Zip code:		

CLASS IN TOP BOX PRICE IN BOTTOM BOX

REQUIRED WITH ENTRY:

Make Checks & MO's payable to WMRC

- _____ Include payment – Check, Cash or MO (signed blank check)
- _____ Signature Below Exhibitor/ Parent
- _____ Copy of Coggins/ Rabies-Dated within 12 months
- _____ Stall Usage Fee - \$10.00 per stall
- _____ Stall Cleaning Deposit Fee - \$20.00 per stall **CASH ONLY**

Mail Entries:

Cathy Dorr
 1697 W. Lunenburg Rd Lunenburg VT 05906

Liability Waiver

I fully understand the inherent dangers to myself, any minor child, my horse, and my possessions while engaged in any equine activity. I further agree to hold harmless: The White Mountain Riding club, The WMRC Show Committee, The Lancaster Fair Association, their Directors, Officials, Sponsors, Members and Volunteers while attending or exhibiting in this show; in the event of injury, damage, loss, or death to myself, my minor child, my horse, and my possessions, I agree that I have entered the above with understanding of the rules of this show. My signature on the form is proof of my acceptance of the rules and regulations of this show and the understanding of the above. Signature(s) below indicate that each of us has read and understands the above. **All Dogs must be on leash and must have a rabies certificate in possession. May be asked to prove vaccine status. Tags do not count!**

All Horses must have Proof of Rabies Vaccines. Out of State horses must have proof of Negative Coggins Test within 12 months.

***** All riders under 18 years of age are required to always wear an ASTM approved riding helmet while mounted*****

Exhibitor Signature: _____ Parent/Guardian must sign if rider is under 18 years of age

Owner of Horse Signature: _____ DATE: _____

FOR OFFICE ONLY! PLEASE DO NOT FILL OUT!	
Total Entry Fees _____ X \$9	\$ _____
Total Championship class fees ____ X \$12	\$ _____
Post Entry One Time Fee \$15 (if late)	\$ _____
Office Fee nonrefundable	\$ <u>5</u> _____
Stall Fee (\$10 per stall)	\$ _____
Must notify Show manager # stalls _____	
Total Amount Due:	\$ _____