



Spring Tune Up

April 8 - 10, 2022

FOR SHOW QUESTIONS:

Contact Todd Perkins – 612-804-1533 or

Visit www.springtuneuphorseshow.wordpress.com

Send entry with check, Coggins, and orders for stall and advance shavings by FRIDAY APRIL 1st to:

Alice Lear

36 Radford Road

Hastings, MN 55033

Phone/Fax: (651) 437-2725

Email: learalice71@gmail.com

ONE OWNER PER ENTRY Stable:

Office #	Name & Registration # HORSES (no more than 3)	RIDER/DRIVER (w/City/State if different from owner)/ASHA #	Jr Rider Age/DOB		Class	Class	Class	Class	Class	Total Fees
	Horse1			Class						
				Fee						
	Horse2			Class						
				Fee						
	Horse3			Class						
				Fee						

This Spring Tune-Up Horse Show, its employees or the owners of the show grounds, will not be responsible for any loss, personal injury or damage to horses exhibited or for any article of any kind or nature that may be lost or destroyed or in any way damaged. Each exhibitor will be responsible for any injury that may be occasioned to any person or any animal or damage to any property while on the grounds by any horse owned or exhibited by him and shall indemnify the management and its staff against all legally established claims or damages of any kind or nature that may grow out of any injury occasioned by horse owned or exhibited by him. Presentation of this entry blank shall be deemed acceptance of these rules. The terms listed above are accepted by the undersigned.

THIS ENTRY FORM MUST BE SIGNED BY OWNER OR AGENT TO BE HONORED.

Owner or Agent's Signature _____
 Owner's Name (print) _____ ASHA # _____
 Address _____
 City: _____ State/Zip _____ Tel# _____
 Trainer's Name _____ ASHA # _____

Rider 1 Signature _____ Rider 2 Signature _____ Rider 3 Signature _____
 Signature is required of Parent(s) if exhibitor is under 18 years of age

PLEASE STABLE WITH: _____

Class fees		
Box And Tack Stalls or Shares	125.00	
Double Stalls	250.00	
Office Fee - Per Horse	20.00	
Class Sponsor - Regular	25.00	
Class Sponsor - Stake	35.00	
Shavings	10.00	
Camping Hook Up For Weekend	75.00	
Late Fee – After Thursday 5PM	10.00	
PRE-ENTERED Costs		
Paid: Cash _____ Ck # _____ Amount _____		
BELOW FOR OFFICE USE ONLY		
TOTAL OF ALL ABOVE COSTS INCL ADDS		
TOTAL PRE-PAID		
BALANCE DUE		
Paid: Cash _____ Ck # _____ Amount _____		