



UPHA CHAPTER 10 SPRING HORSE SHOW 2018

ONE OWNER PER ENTRY BLANK

ENCLOSE COPY OF REGISTRATION PAPERS SHOWING PROOF OF CURRENT OWNERSHIP FOR EACH SADDLEBRED AND SCHOOL HORSE ENTERED, A CURRENT NEGATIVE COGGINS TEST, AND A COPY OF CURRENT UPHA MEMBERSHIP CARD WITH DEPOSIT. **NO ENTRIES PROCESSED UNTIL MONEY RECEIVED. NO REFUNDS ON STALL FEES.**

OWNER'S NAME: _____

ENTRIES CLOSE: APRIL 18, 2018

Circle A or B for each entry	*		NAME OF HORSE	AGE	COLOR	SEX	HT	HORSE REG.	RIDER/DRIVER NAME	CLASS	CLASS	CLASS	CLASS	CLASS
	A													
	B													
	A													
	B													
	A													
	B													
	A													
	B													
	A													
	B													
	A													
	B													

Every entry at this Show shall constitute an agreement and affirmation that the person making it along with the owner, lessee, trainer, manager, agent, rider, and the horse shall be subject to the local rules of the show; that every horse and rider is eligible as entered and that the owner and any of his representatives are bound by the rules of the show and will accept as final the decision of the judge on any question arising under said rules and agree to hold the show, their officials, directors, and employees harmless for any action taken; that the owner and rider and any of their agents or representatives agree to hold harmless the show, and their officials, directors, employees, and agents for any injury or loss resulting directly or indirectly from the negligent acts or omissions of said officials, directors, employees or agents of the show.

Further, the undersigned agrees to hold UPHA Chapter 10, their employees, and show management harmless for lost, damaged, or stolen property and for any injury to horse, exhibitors, and spectators before, during, and after the show.

*** EXHIBITORS MUST DECLARE CIRCUIT FOR WHICH EACH ENTRY'S SEASON POINTS ARE TO COUNT: A OR B (does not apply to Academy entries).**

Trainer: _____

Owner: _____

Address: _____

Phone: _____ Email: _____

Stable with: _____

Exhibitor Signature (Parent/guardian if minor)

MAKE CHECKS PAYABLE TO:

UPHA CHAPTER 10

MAIL ENTRIES TO:

Cheryl Rangel, Show Secretary

1101 Peace Drive

Wheeling, IL 60090

847-537-4743

TracesCT@aol.com

www.horseshowcalendar.com

Stalls available Wednesday, April 25th
after 3 PM

FOR OFFICE USE

Check No. _____

Amount _____

EB# _____

Qty		Fee	Total
	Classes	\$35 each	
	Championships	\$45 each	
	Post Entry Office Fee	\$50 /Horse	
	Box Stalls Tack Stalls	\$90 /wknd	
	Office Fee/Rider	\$25	
	Bedding	\$9	
	Hay	\$11	
Class No.	Sponsorship Class	\$35	
	Camping Hook Up	\$30/day	
TOTAL CHARGES			



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ACADEMY ENTRY FORM

(See Other Side For Show Horse Entry Form)

AGE MUST BE INCLUDED

[illegible]

Stable Name _____

Address _____

Phone No. _____

Email _____

I hereby certify that every horse and/or rider is eligible as entered, I make these entries at my own risk and am subject to the rules of the show, I agree for myself and my representatives to be bound thereby, I hereby engage to be responsible for any injury or damage that may occur to or be caused by any animal ridden by me. The undersigned agrees to hold UPHA Chapter 10, their employees, and show management harmless for loss or injury to any horse or rider.

Stable owner or agent signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Make checks payable to: **UPHA Chapter 10**
Open check must be left at Show Office before start of Show.
Multiple entries may be made on one blank.
Have each person sign on one line.

Mail to: Cheryl Rangel, 1101 Peace Drive, Wheeling, IL 60090
Phone: 847-537-4743

Thank You, and we'll see you at the show! -- UPHA Chapter 10 Show Staff