LEONE EQUESTRIANS INC.

February 10-11, 2018

One horse per entry form please

#

Horse Name	Age	Color	Sex	Height	

Trainer	Address	City/St	ZIP	

Home #	Barn #	Email	Barn Name
( )	( )		

Owner	Address	City/St	ZIP	

Home #	E-Mail
( )	

Rider A	Address	City/St	ZIP	Date of Birth

Home #	E-Mail
( )	

Rider B	Address	City/St	ZIP	Date of Birth

Home #	E-Mail
( )	

Classes for Rider A															
Classes for Rider B															

RIDERS NUMBERS WILL NOT BE RELEASED WITHOUT AN OPEN CHECK ON FILE IN THE HORSE SHOW OFFICE

I, the undersigned, assume full risk and responsibility and agree to indemnify and save harmless LEONE EQUESTRIANS, INC and SAHJA, it's owners, empoyees, agents, and director's thereof, all and singular from and against any and all liability for injury, loss, costs or expenses or any claims thereof of whatever nature arising or to arise for or on account, or by reason of the entry or entries hereby made by or for myself, person(s) handling or riding my entry, my family or guests.

I hereby represent that entry/entries made on behalf of exhibitors under the age of 18, that I am one of the parents or a duly appointed legal guardian, and as such am entitled to make this entry for or on behalf of such minor exhibitor.

Signature of Rider A (Must be 18 or over, otherwise signature of Parent/Guardian Rider's Age

Signature of Rider B (Must be 18 or over, otherwise signature of Parent/Guardian Rider's Age

MUST BE 18 OR OVER TO SIGN!!! MINORS MUST HAVE PARENT/GUARDIAN SIGNATURE PRIOR TO RELEASE OF ENTRY NUMBER.

Stall reservations must be received by February 5th and sent to PO Box 681, Wilton, CA 95693

Entry Fees

	$5
	$2
Classes ___ @ $20	_____
Stalls # ___ @ $100	_____
Drug Fee	_____
SAHJA Fee	_____
Fri Schooling @ $25	_____
RV's @ $25/day	_____
Other	_____

Paid: Cash _____

Ck# _____

Balance Due _____

NOW ACCEPTING CREDIT CARDS

Name on card _____

Card number _____

Expiration date _____

Signature _____

FOR OFFICE USE