

## 2025 TRI-COUNTY HORSEMEN SHOW ENTRY FORM

Circle show date:    June 1 (double judged)                      August 10 (Double Judged)                      September 7  
 Date for Pre-Entry:    May 26    August 4    September 1

ENTRY FEES (except Medal): \$10/Class    DOWNEAST MEDAL CLASS: \$20/Class    LATE ENTRY FEE: \$15/Show (for non pre-registration)  
 Double Class Fees for June and August

HORSE # (if already have one from us) \_\_\_\_\_ MEMBER: YES\_\_\_\_\_ NO\_\_\_\_\_

Rider Name:	Age:
Address:	Tel No.
Horse Name:	AQHA #:
Horse Owners Name & Address:	Email:

### ENTER CLASS NUMBER


Required with Entry:

\_\_\_\_\_ Payment before entering ring  
 \_\_\_\_\_ Exhibitor Signature (with parent if applicable)  
 \_\_\_\_\_ Copy of Coggins & Rabies  
 \_\_\_\_\_ AQHA Registration (if applicable)

Total # of Medal Classes _____ x \$20	\$ _____
Total # of Non-medal Classes _____ x \$10	\$ _____
Late Entry Registration Fee for the Day \$15	\$ _____
Office Fee for the Day \$20	\$20.00
Non Member Fee for the Day \$20	\$ _____

Mail Entry Forms to: Stacie Mariano, 893 West St. Ste 101, Rockport, ME 04856  
 Scanned/Email Forms: tch.showsec@gmail.com (all forms must be included)

TOTAL AMOUNT DUE                      \$ \_\_\_\_\_

PAID              Check\_\_\_\_\_              Cash \_\_\_\_\_

## LIABILITY WAIVER

I hereby certify that every horse, rider and handler is eligible as entered and I agree to be bound by the by-laws and rules of the Tri-County Horsemen and Union Fair Association. I further agree that if any damage or loss occurs to any of the horses or property which I may have at the show, that I will make no claims therefore. I further agree to indemnify and hold harmless the show committee and all horse show officials against all claims, demands, lawsuits and expenses arising out of any injury to any person or animal or to any property caused by myself, my attendant or my animal. My signature on the form is proof of my acceptance of the rules and regulations of this show and the understanding of the above indicates that we have all read and understand the above.

Exhibitor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Parent or Guardian if a minor: \_\_\_\_\_

Date: \_\_\_\_\_

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Tri-County Horsemen Use:

Date Received: \_\_\_\_\_ Paid: Yes \_\_\_\_\_ No \_\_\_\_\_  
Cash \_\_\_\_\_ or Check # \_\_\_\_\_ or Venmo \_\_\_\_\_

Is Rider a Member: Yes \_\_\_\_\_ No \_\_\_\_\_ Is Owner a Member: Yes \_\_\_\_\_ No \_\_\_\_\_

Vet Documents Received: Yes \_\_\_\_\_ No \_\_\_\_\_