

IEF OPEN ENGLISH HORSE SHOW

ENTRY FORM

Horse Name _____ DOB _____ Height _____ Breed _____ Sex _____

T.I.P. Number _____

Owner Name _____ Address _____ City/St _____ Zip _____

Phone _____ email _____

Rider Name _____ Address _____ City/St _____ Zip _____

Phone _____ email _____ DOB _____

CLASS: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30

Stall \$20/day or \$50/weekend _____

Out of Trailer \$15/day _____

Office Fee \$10/horse _____

IEF Non-member Fee \$10 _____

\$5 classes x _____ = _____

\$10 classes x _____ = _____

Shavings \$10/bag x _____ = _____

Camping \$25/night x _____ = _____

TOTAL _____