



Leon County Horsemen's Association

Speed Show Entry Form

LCHA Arena • Tallahassee, FL

****One form per horse/rider combo****

Entry Fees
Grounds Fee (Per Horse): \$5.00 Exhibition (Single Run): \$5.00 Exhibition (Unlimited): \$20.00 4D Jackpot: \$30.00 Carry Over: \$10.00 LCHA Classes (Mbr): \$5.00 LCHA Classes (Non-Mbr): \$7.00 LCHA Classes (Unlimited Mbr): \$20.00 LCHA Classes (Unlimited Non-Mbr): \$30.00

Divisions
Buckaroo: 6 years old and under* (Exhibitors may run independently or with a leadline.) Youth: 7–12 years old Junior: 13–18 years old Senior: 19 years old and over

Important Notes
• Payment accepted by cash, check (payable to LCHA), or credit card (processing fee applies). • If you no-time in the jackpot, you will also no-time your carryover. • Jackpot payouts are by check. Checks not picked up at the show will be mailed to the address on this form.

☐ 1. Exhibition (Single Run)	☐ 3. 4D Jackpot Cloverleaf Barrels
☐ 2. Exhibition (Unlimited)	☐ Carry Over

Cloverleaf Barrels

- ☐ 10. Buckaroo
☐ 11. Youth
☐ 12. Junior
☐ 13. Senior

Cone Weave

- ☐ 18. Buckaroo
☐ 19. Youth
☐ 20. Junior
☐ 21. Senior

Arena Race

- ☐ 26. Buckaroo
☐ 27. Youth
☐ 28. Junior
☐ 29. Senior

Pole Bending

- ☐ 14. Buckaroo
☐ 15. Youth
☐ 16. Junior
☐ 17. Senior

Texas Barrels

- ☐ 22. Buckaroo
☐ 23. Youth
☐ 24. Junior
☐ 25. Senior

Grounds Fee

- ☐ Entry Horse
☐ Addt'l Horses: _____

Under Florida Statute, Section 773.02, except as provided in Section 773.03, an equine activity sponsor, an equine professional, or any other person, which shall include a corporation or partnership, shall not be liable for an injury to or the death of a participant resulting from the inherent risks of equine activities and, except as provided in Section 773.03, no participant nor any participant's representative shall have any claim against or recover from any equine activity sponsor, equine professional, or any other person for injury, loss, damage, or death of the participant resulting from any of the inherent risks of equine activities.

Negative Coggins required for all horses!

Rider's Name: _____ Phone: _____

Horse's Name: _____ ☐ LCHA Member?

Email Address: _____

Mailing Address: _____

Please include street address, city, state, and zip.

Office Use Only:	Amount Paid: _____	Ref #: _____
☐ Coggins Reviewed	Notes: _____	