REMEMBER to mark each class Judge "A" and/or Judge "B" and/or Judge "C"

HORSE'S NAME

## ENTRY FORM BLUE RIBBON HORSE SHOW

**OWNER** 

PLEASE WRITE LEGIBLY
SPELLING IS IMPORTANT
FOR YEAR-END AWARDS

CLASS # JUDGE A JUDGE B JUDGE C

Halter Incentive: Specify which 1 Division you want your Halter Points to Count Towards for Daily High Points & Year-End Points:

## **ENTRY FEES**

Pre-Entry: \$11.00 per class per judge
Post Entry: \$12.00 per class per judge
Schooling Fee - \$10.00 per class
Arena Fee: \$15.00 per horse
+ EMT Fee \$5.00 per exhibitor

				_			
eadline:	Arena	ጼ	FMT	fees	will	he	waived

FEE

**EXHIBITOR** 

							Legal Guardian)	:		•		SUB-TOTAL	
By submitting this entry, I acknowledge that I am entering this horse show at my own risk, and am subject to all rules and regulations of the VHR Horse Shows, Inc. dba Blue Ribbon Horse Shows, Western Saddle Club, Friends of Horse Lovers Park, Bert & Megan McGill, AE Mgmt LLC, LCS-Westminster partnership IV LLP, the City of Phoenix, the State of Arizona Equine Activity Law (ARS 12 553), the US Bureau of Reclamation, it's officers, officials,								ASE USE SEPARATE ENTRY FORM FOR EACH RIDER AND HORSE			ARENA FEE \$15.00 per horse EMT FEE \$5.00 per exhibitor		
								DEELWING 500	000470450	1	TOTAL		
agents, or employees of the above, against any and all claims, liabilities, losses, costs, damages, an fees incurred as a result of participation of this entry. I, my heirs, trustees, assignees, will make no cla them now or in the future. It is expressly understood and agreed that Show Management does not result in the future.							es, and/or attorney no claims against	NO		NDS FOR SCRATCHED NISSED CLASSES		Sorry, No Credit Cards Checks or Cash Only	
insurance unpredicta	for the be able nature	nefit of th and irrati	e exhibitor onal beha	<ul> <li>r. I acknowledge th</li> </ul>	nat equine activity regardless of the	es are inherently da	angerous because of t performance as we				oneone	or Gusti Gilly	
Birthdate of Minor - Age as of Jan. 1st					Signature of	Signature of Owner				Signature of Exhibitor			
Signature of Parent or Guardian					Owner's address					Exhibitor's Address			
MAKE CHECKS PAYABLE TO AND MAIL TO: <b>BLUE RIBBON</b>					City	Zi	Zip			State		Zip	
c/o Blue 15026 N					CK Telephone				- CHECK	Telephone			
Phoenix, AZ 85032 daytime phone: 602-992-2145					Email:				IF NEV	Email:			