

Sienna Stables Horse Show Entry Form

One Entry per Rider/Horse Combination



Rider's Name:		Show Date:			
LAST NAME	FIRST NAME	MIDDLE INITIAL			
ADDRESS			CITY	STATE	ZIP CODE
EMAIL ADDRESS	CELL PHONE	NUMBER		BARN	
AQHA HORSE REGISTRATION #	AC	QHA MEMBER #			
CIRCLE ONE AMAT	EUR RIDER JU	JUNIOR RIDER 18yrs and under (must have guardian signature below)			
HORSES NAME		COGGINS ACCESSION # Attach a copy of the horse's coggins wi		TEST DATE	
Please list the classes that you v	vish to enter				
CLASS NAME	CLASS	#	CLASS NAME		CLASS #
Mail to: Sienna Stable					
8255 Camp Sienna Missouri City, TX 7		Class Fee:	\$12.0	00 per horse	
281-778-743 siennastables.c		Stall Fee (Day):	\$30.0	00 per horse	
siennastables.co	m	Stall Fee (Overnight):	\$40.0	00 per horse	
		Office Fee:	\$10.0	00 per horse	
			TOTAL AM	IOUNT DUE:	
	NO ENTRIES ACCEPTED WITH	OUT ATTACHED CHEC		ARD	
SCAN AND EMAIL	ENTRY TO: Laura@siennastab	les.com with credit card	number, expire	date, and securit	y code
CREDIT CARD TYPE	CREDIT CARD NUMBER		EXPIRE DATE	3 OR 4	DIGIT SECURITY CODE
		RESENTED PRIOR TO SH			
	You must rent a stall to partici e Schooling Show and access t				all claims against
Sienna Stables, Co., Ltd., its emp	oloyees, the judges, HDS and vo	lunteers for any lost, sto	olen, or damage	ed articles and fur	
	for any injury sustained by an	y horse, participant, spe	ectator, or volun	iteer.	
PARTICIPANTS SIGNATURE			DATE		
If the participant is a minor, I hav		entry and do hereby con r for whom I have legal g			
Schooling Show.	(2 111110			, <u></u> ,	
PARENT OR GUARDIAN SIGNATURE			DATE		
			DATE		
TRAINER/INSTRUCTOR SIGNATURE (M	UST SIGN TO SCHOOL STUDENT)		DATE		
Warning: Under Texas Law (Cho part	apter 87, civil Practice and Rem icipant in equine activities resu				ury to or death of a