

Colorado POA Club Entry Form

Apr-21

Fill out a separate entry form for each pony/rider combination. Please print legibly.

Show Date: _____

Contestant Number: _____

(If reusing back number from previous shows)

Birthdate: ____/____/____

Age Group on Jan.1 of Current Yr. (Circle): Leadline 6&U 9&U 10-13 14-18 19&O

Registered Name of Pony/Horse	Sex	Reg. Number	Yr. Foaled	Height

Name of Rider	Sex	Owner's Name

Send early entries by 5 p.m. Thurs before the show to: Emily Andrews
 708 Diana St.
 Fort Morgan, CO 80701
 contact@copoac.org

Questions? Call Peggy, 970-483-7491

BILL TO: Name _____
 Address _____
 City, State, ZIP _____
 Phone _____
 Email _____
 Parent/Guardian _____
 (Please Print)

Warning -- Under Colorado Law, an equine professional is not liable for an injury to or the death of a participant in equine activities resulting from the inherent risks of equine activities, pursuant to section 13-21-119, Colorado Revised Statutes. I assume all risk and responsibility for loss, injury, or damage incurred to or by my children, my representatives, my horse(s), or myself and waive any action against the show grounds, CoPOAC, or POAC, Inc. We will abide by the POAC, Inc. rules and CoPOAC rules. The Show Committee will interpret and settle any dispute of said rules. **Entry must be signed below (parent, guardian of minor child, owner, or authorized representative of the pony being shown).**

Signature	Date
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Class # and Class Name	Entry Fee	Class # and Class Name	Entry Fee

Open Show (IBC with Halter)

Office Fee: \$15/Pony if rec'd by 5 p.m. Thurs before the show; \$20 if after or at show. \$ _____

Entry Fee:
 _____ x \$7/Class = \$ _____

Double Judge B & P Show

Office Fee: \$20/Pony if rec'd by 5 p.m. Thurs before the show; \$25 if after or at show. \$ _____

Entry Fee:
 _____ x \$9/Class = \$ _____

If entering 10 or more classes per rider at an Open Show (IBC), just pay a flat entry fee of \$70.

Stall Fee:
 _____ nts. x \$ _____ = \$ _____

Camping Fee:
 _____ nts. x \$ _____ = \$ _____

Donation to Colo. POAC: \$ _____ Thank you!

Payment (Office Only):
 Ck # _____ Cash _____ Pd. CC _____

Grand Total (Entry/Office/Etc.): \$ _____