

IASPFA Horse Show Series 2015

ONE OWNER PER ENTRY BLANK

ENCLOSE COPY OF REGISTRATION PAPERS SHOWING PROOF OF CURRENT OWNERSHIP FOR EACH SADDLEBRED AND SCHOOL HORSE ENTERED, A CURRENT NEGATIVE COGGINS TEST AND A COPY OF CURRENT IASPFA MEMBERSHIP CARD WITH DEPOSIT. **NO ENTRIES PROCESSED UNTIL STALL MONEY IS RECEIVED. NO REFUNDS ON STALL FEES.**

OWNER'S NAME: _____

Stalls Available Thursday

* CIRCLE A OR B FOR EACH ENTRY	NAME OF HORSE	AGE	COLOR	SEX	HT	HORSE REG.	RIDER/DRIVER NAME	CLASS	CLASS	CLASS	CLASS	CLASS
A												
B												
A												
B												
A												
B												
A												
B												
A												
B												

Every entry at this Show shall constitute an agreement and affirmation that the person making it along with the owner, lessee, trainer, manager, agent, rider, and the horse shall be subject to the local rules of the show; that every horse and rider is eligible as entered and that the owner and any of his representatives are bound by the rules of the show and will accept as final the decision of the judge on any question arising under said rules and agree to hold the show, their officials, directors, and employees harmless for any action taken; that the owner and rider and any of their agents or representatives agree to hold harmless the show, and their officials, directors, employees, and agents for any injury or loss resulting directly or indirectly from the negligent acts or omissions of said officials, directors, employees, or agents of the show.
 Further, the undersigned agrees to hold IASPFA, their employees, and show management harmless for lost, damaged, or stolen property and for any injury to horse, exhibitors, and spectators before, during, and after the show.

***EXHIBITORS MUST DECLARE CIRCUIT FOR WHICH EACH ENTRY'S SEASON POINTS ARE TO COUNT: A OR B (does not apply to Academy entries).**

Trainer: _____
 Owner: _____
 Address: _____
 Phone: _____ e-Mail: _____
 Trainer Phone: _____ Email: _____
 Exhibitor Signature (Parent/guardian if minor) _____

MAKE CHECKS PAYABLE TO:
 IASPFA
MAIL ENTRIES TO:
 Kristen Petry, Show Secretary
 PO Box 1118
 New Lenox, IL 60451
 815-347-4395
 KristenPetry@aol.com

Entries Close:
 Spring Show: March 26
 Summer Show: June 26
 Fall Show: October 16

FOR OFFICE USE
 Check No. _____
 Amount _____
 EB# _____

Qty	Fee	Total
Classes	\$35 each	
Championships	\$45 each	
Post Entry	\$50 Horse	
Box Stalls	\$85	
Tack Stalls	\$85	
Office Fee per horse	\$25	
Bedding per bag	\$10	
Box Seats 8 seats	\$50	
Sponsor per class	\$45	
Non-member fee	\$35	
TOTAL CHARGES		

Stable with: _____

ACADEMY ENTRY FORM

IASPHA Horse Show Series 2015

(See *Other Side* For Show Horse Entry Form)

Age Must Be Included

Office Use	Class No.	Name of Horse	Rider's Name	Age	Entry Fee

Stable Name _____

Address _____

Telephone No. _____

E-Mail _____

Qualifier Class _____ @ \$35.00 per class

Championships _____ @ \$45.00 per class

Office Fee _____ @ \$25.00 perhorse

Stalls _____ @ \$85.00 each

Bedding _____ @ \$10.00 each

Total Enclosed _____

I hereby certify that every horse and/or rider is eligible as entered. I make these entries at my own risk and am subject to the rules of the show, I agree for myself and my representatives to be bound thereby. I hereby engage to be responsible for any injury or damage that may occur to or be caused by any animal ridden by me.

The undersigned agrees to hold IASPHA, their employees, and show management harmless for loss or injury to any horse or rider.

Stable Owner or agent signature: _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Rider or minor's parent/guardian signature _____

Make checks payable to IASPHA.
 Open check must be left at Show Office before start of Show.
 Multiple entries may be made on one entry blank.
 Have each person sign on one line.
 Academy classes will be closed at 26 entries.
 Mail to : Kristen Pettry
 PO Box 1118
 New Lenox, IL 60451
 Email: KristenPettry@aol.com

Thank You, and we'll see you at the show!