

FOUR REEL FARM HORSE SHOW



OFFICIAL ENTRY BLANK

Only One (1) Horse per Entry Blank Please

HORSE INFORMATION	RIDER ONE (1)	RIDER TWO (2)
NAME: _____	NAME: _____	NAME: _____
AGE: _____ HT: _____	ADDRESS: _____	ADDRESS: _____
COLOR: _____ SEX: _____	CITY: _____	CITY: _____
	STATE: _____ ZIP: _____	STATE: _____ ZIP: _____
	EMAIL: _____	EMAIL: _____
	AGE AS OF 12/1/2014: _____	AGE AS OF 12/1/2014: _____

OWNER/AGENT	CLASSES ENTERED FOR RIDER ONE (1)	CLASSES ENTERED FOR RIDER TWO (2)
NAME: _____	_____/_____/_____/_____/_____	_____/_____/_____/_____/_____
ADDRESS: _____	_____/_____/_____/_____/_____	_____/_____/_____/_____/_____
CITY: _____		
STATE: _____ ZIP: _____		
TELEPHONE: _____	Other	
EMAIL: _____	4-H Club Name: _____	
	Horse Lover's Park Membership #: _____	

DISCLAIMER: By signing below as owner, agent, rider, handler, lessee, trainer, coach or as parent or adult guardian of a minor, I am fully aware and acknowledge that equine sports and competitions involve inherent dangerous risks of accident, loss, and serious bodily injury including broken bones, head injuries, trauma, pain, suffering and/or death ("Harm"). By signing below, I agree to release the competition from all claims for money damages or otherwise for any Harm to me or my horse and for any Harm caused by me or my horse to others, even if the Harm resulted directly or indirectly from the negligence of the competition. If I am signing as a parent or guardian of a junior exhibitor, I consent to the child's participation and agree to all of the above provisions and agree to assume all of the obligations of this release on the child's behalf. I agree that the term "competition" as used above includes, but is not limited to, the horse show, Four Reel Farm, its officials, officers, directors, employees, contractors, agents, personnel, volunteers and affiliated organizations, as well as the facility (Horse Lovers Park).

Owner/Agent: _____ Rider One: _____
 Trainer: _____ Rider Two: _____
 Parent / Adult Guardian (if rider(s) are minors): _____

OFFICE USE	
Class Entry Fee @ \$20/ea	\$ _____
Pre-Entry / 4-H Member Discount \$5/class	\$ (_____)
Sub-Total Amount	\$ _____
Office Fee	\$25.00
Day Pen @ \$30	\$ _____
Haul In Fee @ \$25	\$ _____
AHJA Fee @ \$1	\$1.00
HLP @ \$5/day (or provide member #)	\$ _____
Total Amount	\$ _____

Make checks payable to: Four Reel Farm
Mailing Address: Four Reel Farm, PO Box 503,
 Congress, AZ 85332