

Larimer County Spring Charity Horse Show

- Only one horse per entry form
- A \$25 return check fee will be charged
- All fees must be paid in full with this entry

NRHA ENTRIES

Non-rated US Equestrian Federation

Mail entries to: Anne Burton
560 West St., Louisville, CO 80027

For office use only

Back
Check #

We request entries be postmarked by May 10. Post entries will be accepted.

HORSE INFORMATION - Enclose copy of NRHA License

NRHA License #	Name of Horse	Breed	Sex	Foal Date
----------------	---------------	-------	-----	-----------

OWNER INFORMATION AS RECORDED ON NRHA LICENSE (Enclose copy of NRHA membership card or all cards if more than one owner.)

Names	Phone	NRHA Number(s)	Address	City	State	Zip
-------	-------	----------------	---------	------	-------	-----

PAYBACKS TO (Person to whom prize money will be sent. Social Security Number or Tax ID number REQUIRED.)

SS# or Tax ID#	Name	Phone	Address	City	State	Zip
----------------	------	-------	---------	------	-------	-----

PERFORMANCE ENTRIES (Enclose copy of rider's NRHA card)

Class & Name	RIDER'S NAME & NRHA #	Entry Fee	Judges Fee	Total Fees	Amount
R1 Green Horse		\$ 20	\$20	\$ 40	
R2 Green Rookie		\$ 20	\$20	\$ 40	
R2PT Prime Time Green Rookie		\$ 20		\$ 20	
R3 Rookie		\$ 25	\$25	\$ 50	
R3PT Prime Time Rookie		\$ 20		\$ 20	
R4 Novice Horse Open		\$ 50	\$25	\$ 75	
R5 Novice Horse Non Pro		\$ 50	\$25	\$ 75	
R6 Limited Open		\$ 25	\$20	\$ 45	
R7 Rookie Professional		\$ 25	\$20	\$ 45	
R8 Limited Non Pro		\$ 25	\$20	\$ 45	
R9 Open		\$100	\$35	\$135	
R10 Intermediate Open		\$ 50	\$25	\$ 75	
R11 Non Pro		\$100	\$35	\$135	
R12 Intermediate Non Pro		\$ 50	\$25	\$ 75	
R13 Prime Time Non Pro		\$ 25	\$25	\$ 50	
R14 Short Stirrup		\$ 10		\$ 10	
R15 Youth 14-18		\$ 10		\$ 10	
R16 Youth 13 & Under		\$ 10		\$ 10	
R17A USEF Youth Qual. 13 & U		\$ 25		\$ 25	
R17B USEF Youth Qual. 14-18		\$ 25		\$ 25	
R17C USEF Youth Qual. 19-21		\$ 25		\$ 25	
TOTAL ENTRY FEES					

Entry Fees	\$ _____
Office Fee @ \$30.00 per horse	\$ _____
Video Review Fee @ \$4/Run	\$ _____
Stall Fee @ \$85 Paid by May 16	\$ _____
Stall Fee @ \$95 Paid after May 16	\$ _____
One Day Stall (if available — no overnight) @ \$50	\$ _____
Non-Stalled Horse Fee (Duration of Show) @ \$40.00	\$ _____
Shavings @ \$7.50/Bale, Pre-order # _____	\$ _____
Camper Fee @ \$20.00 per night Number of nights _____	\$ _____
TOTAL	\$ _____
Make checks payable to LCSCHS	

SIGNATURES REQUIRED ON REVERSE SIDE

COMPLETE BOTH SIDES — OVER

STALL WITH _____
Order shavings above and they will be at your stall when you arrive.

Release

I agree to be responsible for any damage caused by my entries in this show, and that as a condition of my entry, I waive any claim for damages against the Western Stock Show Association, its directors, officers, employees, and agents, and the City & County of Denver; USA Equestrian; the Rocky Mountain Horse Show Association; the Arabian Horse Association; the American Morgan Horse Association; the National Reining Horse Association, the Rocky Mountain Reining Horse Association; and the Larimer County Spring Charity Horse Show management, employees and volunteers, for injury or death to persons or animals or for loss, damage or destruction of personal property. I understand that under Colorado law, an equine professional or activity sponsor 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 13-21-120, Colorado Revised Statutes.

Owner or Agent's Signature (Mandatory)

Rider/Handler/Driver Signature (Mandatory)

Rider/Handler/Driver Signature (Mandatory)

Rider/Handler/Driver Signature (Mandatory)

MINOR (JUNIOR RIDER/YOUTH) EXHIBITOR CONSENT

I hereby consent to the entry of my child in this horse show and acknowledge that I have read the front side and the reverse side of this entry form and agree to the applicable terms, conditions, waivers and consent as set forth herein and accept responsibility hereunder for the participation of said Minor (Junior Rider/Youth).

Name of Minor _____

Birthdate _____

Address _____

City _____ State _____ Zip _____

Phone _____

Signature of Parent or Guardian _____

Print Parent/Guardian Name _____